

MassHealth Payment and Care Delivery Innovation (PCDI)

Provider Education and Communication

Phase II: Operations



Executive Office of Health & Human Services

Agenda



1. Provider Education and Communication Strategy

2. Overview of PCDI

3. Continuity of Care (CoC)

4. Eligibility Verification System (EVS)

5. Health Plan Contact Information

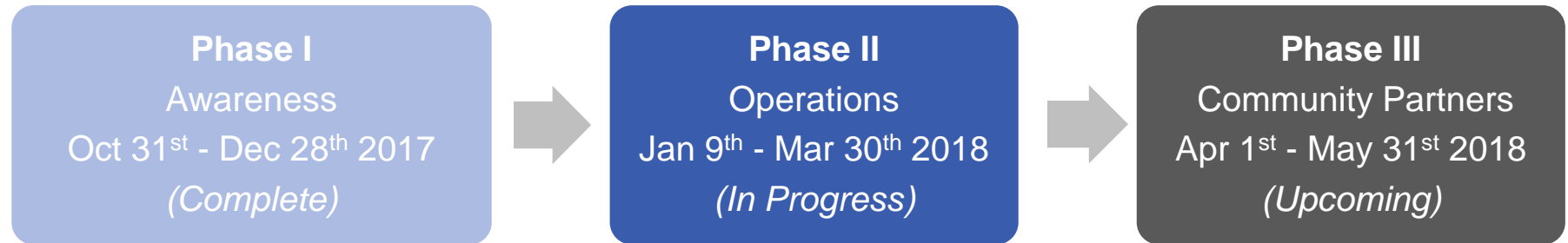
6. Member Information and Resources

7. 2018 Provider Training & Education Schedule

Provider Education and Communication Strategy



MassHealth is conducting three phases of Payment and Care Delivery Innovation (PCDI) education and communication provider trainings:



- The objective of Phase I: Awareness was to provide all attendees with an understanding of MassHealth PCDI and its impact on providers and members
- The Phase I: Awareness webinar can be viewed on the [MassHealth Provider PCDI Resources Web Page](https://www.mass.gov/lists/provider-pcdi-resources) (URL: <https://www.mass.gov/lists/provider-pcdi-resources>)
- **Phase II aims to address key operational questions, and introduce new and enhanced tools to prepare for changes effective March 1, 2018**
- Phase III training will focus on MassHealth Community Partners



Provider Resources: Information and Training

The following web pages provide PCDI resources, materials, and information for providers:

- **MassHealth Provider Webpage:** www.mass.gov/masshealth-for-providers
- **MassHealth PCDI Specific Web Page for Providers:**
 - <https://www.mass.gov/payment-care-delivery-innovation-pcdi-for-providers>
- **MassHealth Innovations:** www.mass.gov/hhs/masshealth-innovations
- **MassHealth Learning Management System:**
 - Register for upcoming webinars and trainings and access to the materials for these sessions. *(Note: a valid Provider ID/Service Location number is required to access these resources)*
 - www.masshealthtraining.com



MassHealth PCDI for Providers Web Page

www.mass.gov/payment-care-delivery-innovation-pcdi-for-providers

MassHealth recently launched a new web page focused on PCDI information for providers. Visit this page to receive the most recent PCDI provider updates and resources.

Key Sections:

First time?

- Guide: Payment & Care Delivery Innovation (PCDI) for Providers

What would you like to do?

- Enroll in a webinar/in-person class
- Log into POSC

What you need to know

- Webinar/in-person class schedules
- Provider PCDI Regulations
- Provider PCDI Resources

Payment & Care Delivery Innovation (PCDI) for Providers

Information for providers about the MassHealth PCDI initiative

MassHealth is introducing new health plan options for its 1.3 million managed care eligible members in the form of accountable care organizations (ACOs). These options are designed to emphasize care coordination, member-centric care, and to align financial incentives. MassHealth will continue to offer managed care organizations (MCOs) and the Primary Care Clinician (PCC) Plan. We've created this page to help providers better understand these payment and care delivery changes as they are introduced in the coming months.

First time?

Guide: Guide:
Payment & Care
Delivery Innovation
(PCDI) for Providers +

What would you like to do?

Featured:

Enroll in a PCDI webinar or live in-person class +

Log on to POSC to verify member's eligibility and new ACO health plan +

What you need to know

PCDI schedule for provider webinars and in-person classes +

PCDI resources for providers +

Regulations amended for PCDI +



Provider PCDI Resources Web Page

<https://www.mass.gov/lists/pcdi-resources-for-providers>

What's Included

Bulletins:

- All Provider Bulletin 272:
Overview of 2018 New Health Plan Options

PCDI Fact Sheets for:

- PCPs
- Specialists
- Behavioral Health Providers
- Hospitals
- LTSS (*Coming Soon*)

Provider Education Tools:

- Provider PCDI Phase I: Awareness Webinar

Links to Member Resources:

- MassHealth Health plan materials and information for members

Provider PCDI Resources

Bulletins, fact sheets, charts, and other materials for providers related to PCDI

IN THIS LIST

- Bulletins
- PCDI fact sheets for providers
- Provider Education Tools
- Links to member resources


Bulletins

-  All Provider Bulletin 272: MassHealth Payment and Care Delivery Innovations (PCDI) (PDF 1.25 MB)
-  All Provider Bulletin 272: MassHealth Payment and Care Delivery Innovations (PCDI) (DOCX 2.65 MB)

PCDI fact sheets for providers

-  PCDI fact sheet for primary care providers (PDF 67.69 KB)
-  PCDI fact sheet for specialists (PDF 69.38 KB)
-  PCDI fact sheet for behavioral health providers (PDF 71.41 KB)
-  PCDI fact sheet for acute care hospitals (PDF 78.58 KB)

Provider Education Tools

-  Provider PCDI Phase I: Awareness Webinar (PDF 1.07 MB)
- [PCDI provider training schedule](#)

Links to member resources

- [MassHealth Health plan materials and information for members](#)
- [Learn about the letters with the green stripes \[new options for members\]](#)

Agenda



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Overview of PCDI

- Effective March 1, 2018, MassHealth is introducing Accountable Care Organizations (ACOs) to approximately 1.2* million managed care eligible members
- There will be three types of ACO models, each designed to emphasize care coordination, member-centric care, and align financial incentives: Accountable Care Partnership Plans, Primary Care ACO Plans, and a MCO-Administered ACO Plan
- MassHealth will also offer two Managed Care Organization (MCO) Plans, and the Primary Care Clinician (PCC) Plan as managed care options



* Member counts are subject to change due to normal activity related to member eligibility and member choice



Eligible Members and Health Plan Options

Managed-care eligible members are:

- Younger than age 65, without any third-party insurance coverage (*including Medicare*)
- Living in the community (*e.g. not in a nursing facility*)
- Enrolled in one of the following MassHealth coverage types: *Standard, CommonHealth, CarePlus, or Family Assistance*

Effective March 1, 2018, managed care eligible members will have the option to enroll in one of the following:

- Accountable Care Partnership Plans
- Primary Care ACO Plans
- Managed Care Organizations (MCOs)
- Primary Care Clinician (PCC) Plan

Note: MassHealth members who receive MassHealth coverage through Fee-for-Service (including those over age 65 or with third-party coverage), OneCare plans, Senior Care Options (SCO) plans, or Program of All-Inclusive Care for the Elderly (PACE) organizations are not affected by PCDI.

ACO/MCO-Covered Services



MassHealth members enrolled in ACOs and MCOs will receive certain services that are **paid for by their plan** (“ACO-Covered” or “MCO-Covered”) and certain services that are **paid for by MassHealth**. Covered services may differ by coverage type. (Refer to plans for more information.)

ACO/MCO-Covered services include:

- **Physical health** services such as primary care, inpatient, outpatient, professional specialty, and emergency physical health services
- **Behavioral health** services such as inpatient, outpatient, diversionary, and emergency behavioral health services
- **Pharmacy services**, with limited exceptions
- **Other Covered Services**, including home health (except continuous skilled nursing), durable medical equipment (DME), hospice, therapy, chronic disease hospitals, rehabilitation hospitals, and nursing homes for the first 100 days of admission



PCDI and Long-Term Services and Supports (LTSS)

The following LTSS services will continue to be paid by MassHealth fee-for-service:

- Personal Care Attendant
- Adult Foster Care
- Group Adult Foster Care
- Adult Day Health
- Day Habilitation
- Continuous Skilled Nursing
- Long-Term (over 100 days) Nursing Facilities, and
- Long-Term (over 100 days) Chronic Disease and Rehabilitation Hospitals

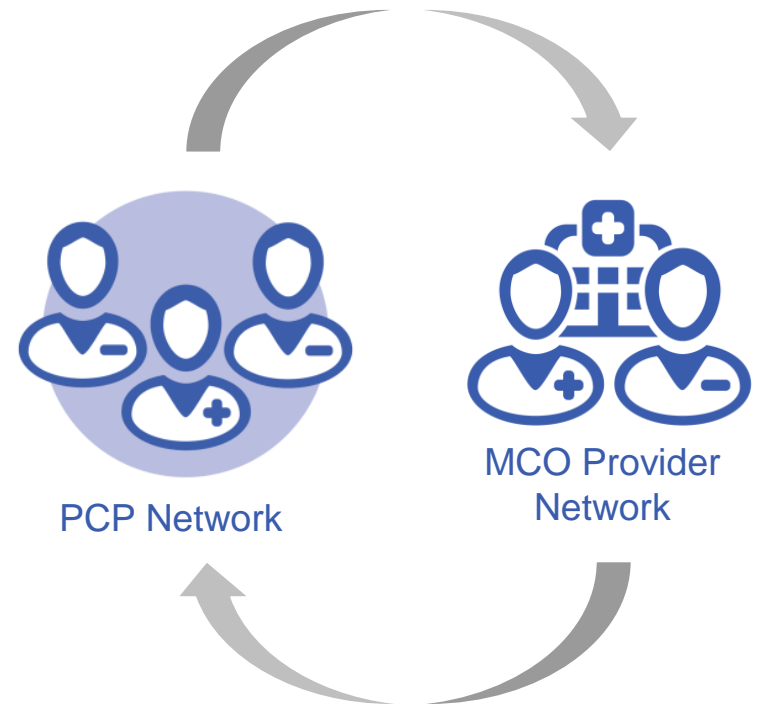
These services will not be included in ACO and MCO total cost of care and capitation rates.

If providers have questions about prior authorizations, claims, referrals, or other matters related to LTSS, they should contact MassHealth's LTSS Provider Service Center, **Optum**, by emailing support@masshealthltss.com, visiting their website, <http://www.masshealthltss.com>, or by calling 1-844-368-5184

Accountable Care Partnership Plans (Model A)

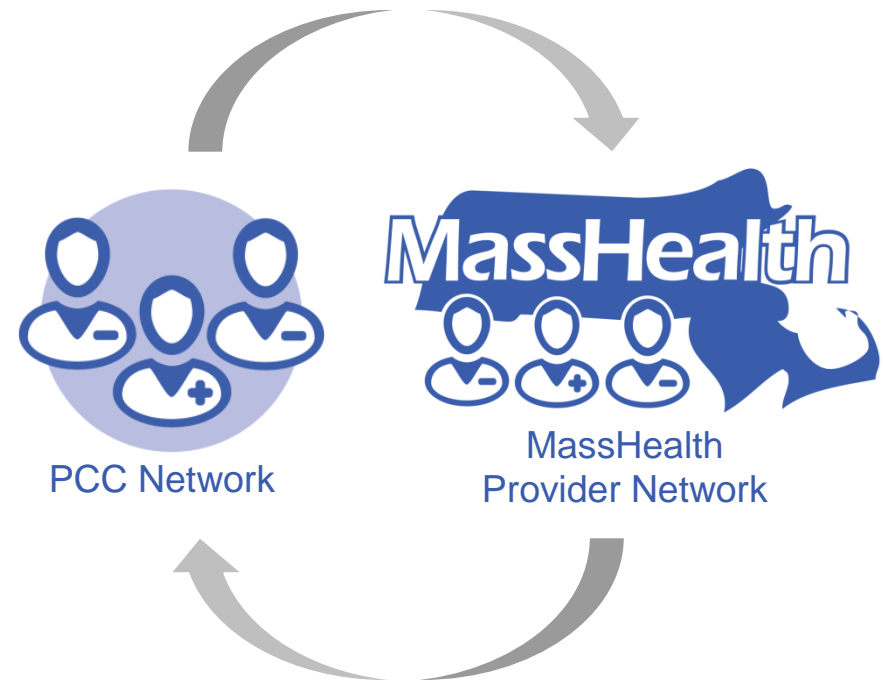


- A network of PCPs who have exclusively partnered with an MCO to use the MCO's provider network to provide integrated and coordinated care for members
- Accountable Care Partnership Plans cover a set of service areas where they will operate. Members must live in the service areas covered by the ACO to enroll in that plan
- MassHealth has contracted with 13 Accountable Care Partnership Plans



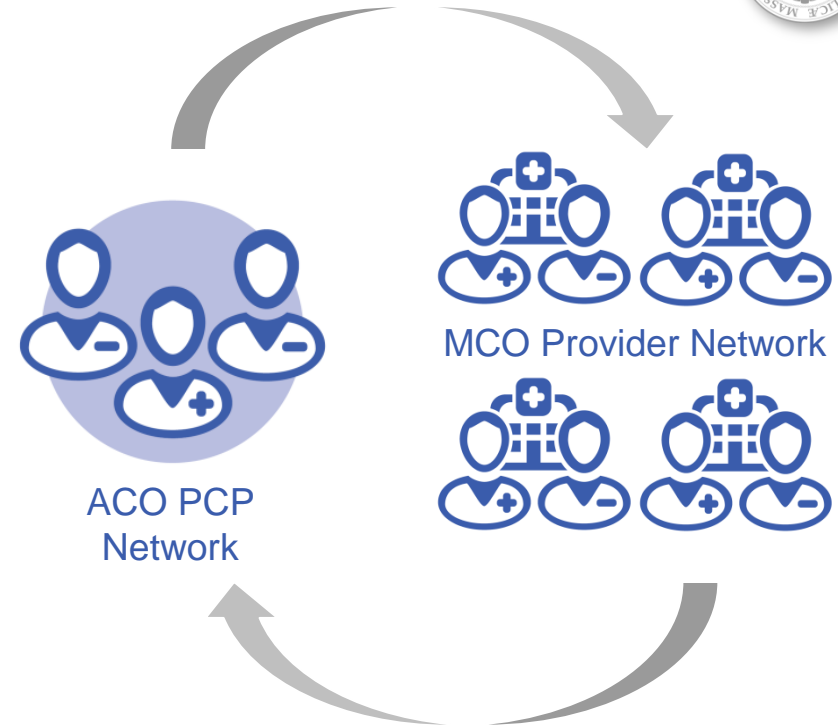
Primary Care ACOs (Model B)

- A network of PCCs who contract directly with MassHealth to provide integrated and coordinated care for members
- Primary Care ACOs work with the entire MassHealth provider network of specialists and hospitals, and may have certain providers in their “referral circle” that will not require a MassHealth referral for the service
- Primary Care ACOs will use the Massachusetts Behavioral Health Partnership (MBHP) for behavioral health services
- MassHealth has contracted with 3 Primary Care ACO Plans



MCO-Administered ACOs (Model C)

- A network of PCPs who may contract with one or multiple MCOs, and use the MCO provider networks to provide integrated and coordinated care for members
- MCO-Administered ACOs are not presented as an enrollment option for members because they will be attributed through their relevant MCO
- There is one MCO-Administered ACO, **Lahey Clinical Performance Network**, which is participating with both MCOs effective March 1, 2018: Boston Medical Center (BMC) HealthNet Plan, and Tufts Health Together



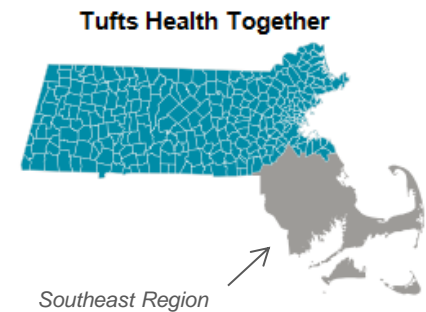
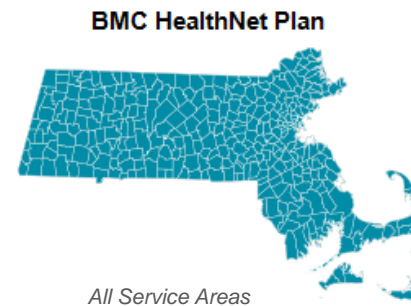


MCOs and the PCC Plan

In addition to ACOs, members will continue to have the following managed care options effective March 1, 2018:

Managed Care Organizations (MCOs)

- MCOs are health plans run by insurance companies that provide care through their own provider network that includes PCPs, specialists, behavioral health providers, and hospitals
- There are two MCO options: Boston Medical Center (BMC) HealthNet Plan, and Tufts Health Together
- BMC HealthNet Plan will operate statewide, and Tufts Health Together will operate in every region except Southeast, MA



Primary Care Clinician (PCC) Plan

- The Primary Care Clinician (PCC) Plan is a statewide plan run by MassHealth that uses the MassHealth provider network
- Behavioral health services for the PCC Plan are provided by the Massachusetts Behavioral Health Partnership (MBHP)
- Members must choose a PCC in order to enroll in a PCC Plan



Current and Estimated Enrollments

Current Managed Care Enrollment as of December 2017

Enrollment	Approximate Number of Members*	Approximate Percentage of Members*
MCOs	834,000	66%
PCC Plan	435,000	34%

Estimated March 1st Managed Care Enrollment

Enrollment	Approximate Range of Members*	Approximate Percentage of Member Assignments*
Accountable Care Partnership Plans	Between 440,000 to 530,000	~45%
Primary Care ACOs	Between 300,000 to 360,000	~31%
MCO-Administered ACOs	10,000	~1%
MCOs & PCC Plan	Between 200,000 to 300,000	~23%

* Member counts are subject to change due to normal activity related to member eligibility and member choice

MassHealth Health Plan Options Effective March 1, 2018



Accountable Care Partnership Plans (Model A)

Be Healthy Partnership - Baystate Health Care Alliance with Health New England
Berkshire Fallon Health Collaborative - Health Collaborative of the Berkshires with Fallon Health
BMC HealthNet Plan Signature Alliance - Signature Healthcare with BMC HealthNet Plan
BMC HealthNet Plan Community Alliance - Boston Accountable Care Organization with BMC HealthNet Plan
BMC HealthNet Plan Mercy Alliance - Mercy Medical Center with BMC HealthNet Plan
BMC HealthNet Plan Southcoast Alliance - Southcoast Health with BMC HealthNet Plan
Fallon 365 Care - Reliant Medical Group with Fallon Health
My Care Family - Merrimack Valley ACO with Neighborhood Health Plan (NHP)
Tufts Health Together with Atrius Health - Atrius Health with Tufts Health Plan (THP)
Tufts Health Together with BIDCO - Beth Israel Deaconess Care Organization (BIDCO) with Tufts Health Plan (THP)
Tufts Health Together with Boston Children's ACO – Boston Children's ACO with Tufts Health Plan (THP)
Tufts Health Together with CHA - Cambridge Health Alliance (CHA) with Tufts Health Plan (THP)
Wellforce Care Plan - Wellforce with Fallon Health

MCOs	MCO-Administered ACO (Model C)	PCC Plan	Primary Care ACO Plans (Model B)
Boston Medical Center (BMC) HealthNet Plan	Lahey Clinical Performance Network (Participating with Boston Medical Center HealthNet Plan and Tufts Health Together)	Primary care Providers in the MassHealth Network	Community Care Cooperative (C3)
Tufts Health Together			Partners HealthCare Choice
			Steward Health Choice

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Continuity of Care (CoC)

Starting March 1, 2018, new Accountable Care Organization (ACO) and Managed Care Organization (MCO) contracts will become effective to improve accountability and integration of care for MassHealth members.

MassHealth is committed to working with all relevant parties to ensure continuity of care for the many members who are moving to new plans, whether they are going to or from an ACO Partnership Plan, a Primary Care ACO, an MCO, or the Primary Care Clinician (PCC) Plan.

The Continuity of Care document may be found on the PCDI web page [MassHealth Provider PCDI Resources Web Page](https://www.mass.gov/lists/provider-pcdi-resources) (URL: <https://www.mass.gov/lists/provider-pcdi-resources>). You may link directly to the document at [Continuity of Care through transition to new managed care arrangements](#).



Continuity of Care (CoC)

30-day Continuity of Care Period

To ensure that members transition to their new plans successfully and continue to have access to all the services they need, all members enrolling into a new plan on or after March 1, 2018, will have a 30-day continuity of care period. The 30-day continuity of care period begins on the first day the member is enrolled with the plan.

For these 30 days, members may continue to see their current providers for previously scheduled appointments and ongoing treatments and services, even if that provider is not part of the member's new plan network. If providers are not part of the new plan's network, they will need to make appropriate arrangements with the Accountable Care Partnership Plan, MCO, or MassHealth in order to be paid by the new plan. Providers will see which plan they will need to consult by viewing the MassHealth Eligibility Verification System (EVS). See slide 24 for more information about EVS.

It is essential that MassHealth and all of its partners—ACOs, MCOs, providers, suppliers, other state agencies, and community assisters—work together to ensure that all MassHealth members have access to care and are able to continue treatments during their transition to new plans.

During the continuity of care period, **all existing prior authorizations for services and for provider referrals will be honored** by the new plan. Members can continue to see all providers currently providing their care during this period, even if that provider is not in their new plan's network.

Continuity of Care (CoC)



30-day Continuity of Care Period Continued

In addition to the general principles above for all members, MassHealth has worked with its ACOs and MCOs to identify members who may need extra help during this transition. They include people who

- are pregnant;
- have significant health care needs or complex medical conditions;
- have autism spectrum disorder;
- have significant mental health or substance use needs;
- are receiving Children's Behavioral Health Initiative (CBHI) services;
- are receiving ongoing services such as dialysis, home health, chemotherapy and/or radiation, or hepatitis C treatments; or
- are hospitalized.

Continuity of Care (CoC)



How MassHealth, ACOs, and MCOs Will Support Member Transitions

Accountable Care Partnership Plans and MCOs are taking the following steps to support member transitions across all covered services.

- Using data to identify highest risk enrollees;
- Providing authorization information, extending existing prior authorizations, or otherwise making accommodations for existing services, treatments, and medications;
- Relaxing referral and prior authorization requirements, where applicable;
- Performing member outreach; and
- Sharing and using medical, behavioral health, and care management information to ensure continuous care during the transition.

Continuity of Care (CoC)



How MassHealth, ACOs, and MCOs Will Support Member Transitions

For Primary Care ACOs and the PCC Plan, MassHealth will perform the functions above, including coordination with our behavioral health vendor. Accountable Care Partnership Plans and MCOs may also

- Enter into single case agreements or out-of-network agreements with providers who are providing services for members but are not part of the new network;
- Contract with critical providers as network providers; or
- Extend continuity of care arrangements in certain cases in order to facilitate continuity beyond the 30-day continuity of care period.

Accountable Care Partnership Plans and MCOs must inform their members if a continuity of care arrangement that has been made for them is short-term (e.g. a time-limited, single case agreement) or long-term in nature (e.g. a network provider agreement). This information will allow members to make informed choices about their plan enrollment options.

Continuity of Care (CoC) – Important Information for All Providers



Use the Eligibility Verification System to Determine a Member's Plan

All providers will be able to access plan enrollment information for their patients. Starting March 1, 2018, EVS will reflect the new plan information for MassHealth members. For more information about new EVS messaging, please go to the [MassHealth's Payment & Care Delivery Innovation for Providers Web page](#).

Continuity of Care (CoC) – Important Information for All Providers



Prior Authorizations for Medical Services During Transition

To the extent possible, MassHealth and all MCOs in effect before March 1, 2018, have shared prior authorization information with new plans for members who are transitioning. MassHealth and the new plans have been working to add known prior authorizations into their systems to prepare for new enrollees. The following are the key general principles around prior authorizations through the 30-day continuity of care period:

- Authorizations approved by another plan before the effective date of the member's enrollment in a new plan will be honored by the new plan through the end of the authorization period or up until the end of the continuity of care period, whichever is first.
- Authorizations that expire before the end of the 30-day continuity of care period will need to be reauthorized by the new plan, subject to the medical necessity determination of the new plan.
- Services that are scheduled, but not authorized, for a date of service on or after March 1, 2018, must be authorized by the new plan after March 1, 2018.

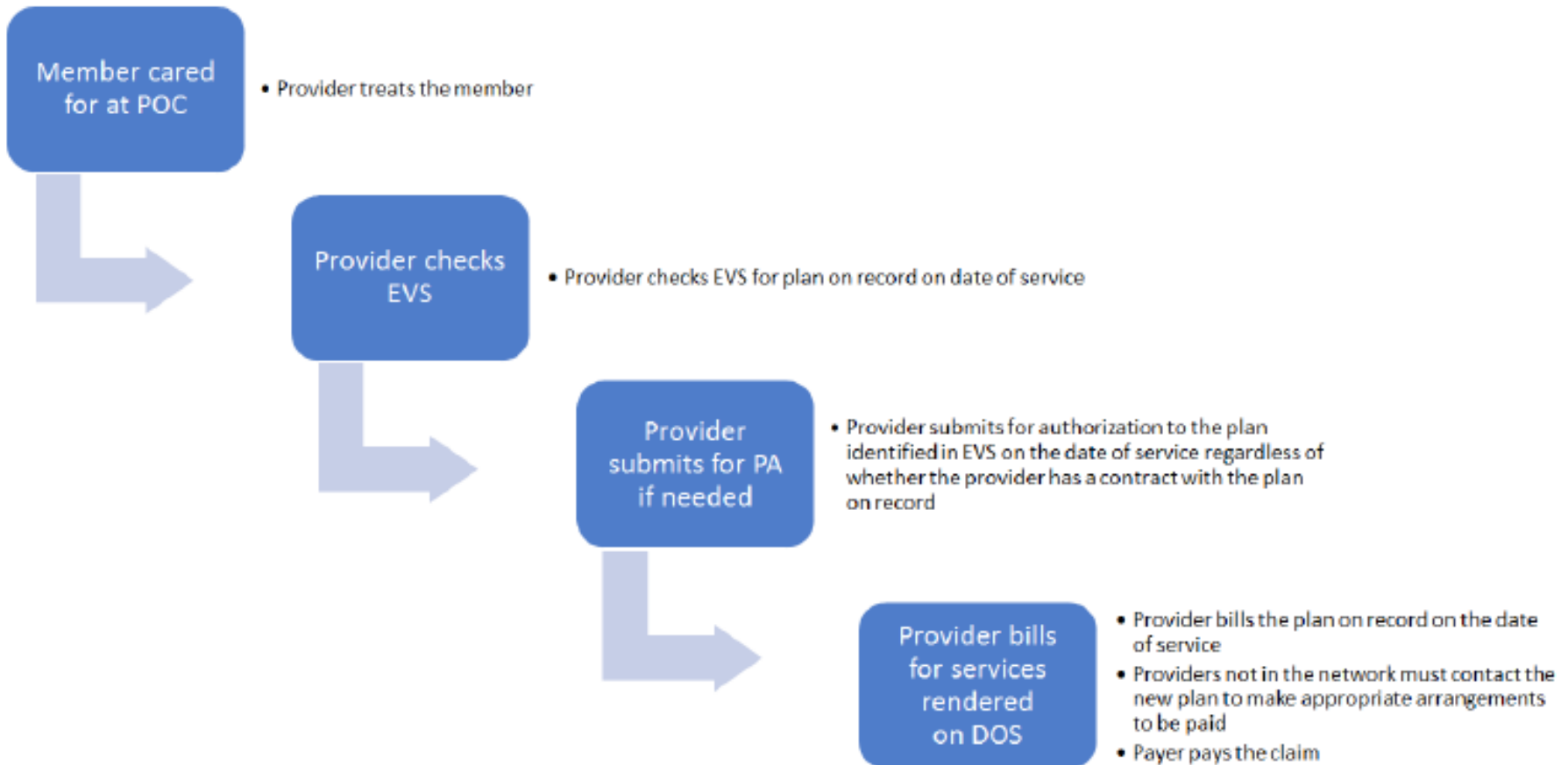
Continuity of Care (CoC) – Important Information for All Providers



Prior Authorizations for Medical Services During Transition Continued

- Members may continue to see the rendering provider of the authorized service through the entire 30-day continuity of care period, regardless of whether that provider is in the network of the new plan. Providers not in the network must contact the new plan to make appropriate arrangements to be paid.
- For members newly enrolling in a Primary Care ACO or the PCC Plan, MassHealth has made every effort to ensure that prior authorizations for individuals have been entered into the MassHealth claims system. However, if a member receives services as part of an existing prior authorization in the first 30 days, and the claim for those services is denied for a reason related to prior authorization, providers should contact MassHealth Customer Service.
- For enrollees of an Accountable Care Partnership Plan or MCO, please contact the plan about denied claims described above.

Continuity of Care (CoC) – Important Information for All Providers



General flow for addressing prior authorizations through transition

Continuity of Care (CoC) – Important Information for All Providers



Knowing Your Networks

Providers should tell their patients about their affiliations with the new plans so members know if special arrangements for continued care need to be made in the short-term, and so they can make informed long-term decisions about their plan enrollment choices. Providers should verify which provider networks they belong to. Providers wishing to join an Accountable Care Partnership Plan, MCO, or the MassHealth Primary Care ACO and PCC Plan network should call the customer service number(s) starting on slide 64 of this presentation.

PCPs who are participating in an ACO may only be PCPs for MassHealth members enrolled in that ACO (this does not apply for the provision of Medication Assisted Treatment (MAT) for individuals with substance use disorder). However, all other providers can be in multiple networks, if appropriate provider enrollment arrangements are agreed to and made with the plan.



Continuity of Care (CoC)

Behavioral Health

There are three behavioral health contractors among all of the managed care plans:

- Beacon Health Options is the behavioral health contractor for Accountable Care Partnership Plans affiliated with BMC HealthNet, Fallon, and Neighborhood Health Plan as well as the BMC Health Net MCO.
- Tufts Health Plan provides its own behavioral health network for its Accountable Care Partnership Plans and its MCO.
- Massachusetts Behavioral Health Partnership (MBHP) provides the behavioral health network for all Primary Care ACOs, the PCC Plan, and Health New England/Be Healthy Partnership Plan.

It is essential that behavioral health providers reach out to payers to ensure that extra care is taken to continue critical services during transition. Members in active mental health or substance use treatment must be allowed to continue with their providers and treatments throughout the continuity of care period. Behavioral health providers should reach out to plans for longer term arrangements. EVS messaging will be very clear about which entity is responsible and pays for behavioral health services for any given member.



Continuity of Care (CoC)

Pharmacy Services

MassHealth, Accountable Care Partnership Plans, and MCOs are working to add approved prior authorizations into their pharmacy claims systems for members who are transitioning between plans. However, it is possible that some pharmacy claims may still require prescriber outreach or prior authorization at the time of service. Pharmacies should take the following actions to ensure that no member is without medically necessary medications during the transition period.

Specifically:

- If a prescription has no remaining refills, the pharmacy must contact the prescriber to get authorization for a new prescription.
- If a prior authorization exists and has not expired, the authorization will be honored by the new plan for the continuity of care period or until the end date of the authorization, whichever is first.
- If a prior authorization has expired, the pharmacy must notify the member of the prior authorization's expiration and contact the prescriber to give them the necessary information to submit to the appropriate new plan. Please note that the pharmacist can bill an emergency override for the medication (for a minimum 72-hour supply) while the prescriber works on the authorization.

Continuity of Care (CoC)



Pharmacy Services Continued

- If a prescription lacks a required prior authorization, the pharmacy must notify the member of the prior authorization requirement and contact the prescriber to give them the necessary information to submit to the appropriate new plan. As above, the pharmacist can bill an emergency override for the medication (for a minimum 72-hour supply) while the prescriber works on the authorization.

For any questions or concerns related to emergency overrides, prior authorizations, or claims for a Primary Care ACO or PCC Plan member, a pharmacy or prescriber can call the Drug Utilization Review (DUR) program at 1-800-745-7318. For a member enrolled in an Accountable Care Partnership Plan or MCO, a pharmacy or prescriber can call the program contact on the denied claim or authorization, or the plan's continuity of care contact designated below.



Continuity of Care (CoC)

Durable Medical Equipment, Home Health, Therapies, Orthotics, Prosthetics, Oxygen and Respiratory Supplies, Hospice, and Nursing Facility Stays Less Than 100 Days

It is most important that providers reach out to payers to make sure that extra care is taken to continue essential services during transition. Members in active treatment must be allowed to continue with their providers and treatments throughout the 30-day continuity of care period. Providers should reach out to plans for longer term arrangements. EVS messaging will be very clear about which entity is responsible and pays for any services for any given member.

Information about prior authorizations and existing services has been shared to the extent possible for members enrolled in an Accountable Care Partnership Plan or MCO. Existing authorization periods must be honored by plans receiving new enrollees.

If the member enrolls in a Primary Care ACO or the PCC Plan, and a prior authorization is necessary, these providers should submit claims for the first 30 days of service to MassHealth via the Provider Online Service Center (POSC). MassHealth has made every effort to ensure that prior authorizations for individuals served by these provider types have been entered into our system. However, if a member receives services as part of an existing prior authorization in the first 30 days and the claim for those services is denied, providers can contact the LTSS Provider Service center at 1-844-368-5184.



Continuity of Care (CoC)

Long-Term Services and Supports Provided Through MassHealth

MCOs and ACOs are not currently responsible for the delivery of the following long-term services and supports:

- Adult Foster Care;
- Group Adult Foster Care;
- Adult Day Health;
- Personal Care Attendant;
- Day Habilitation;
- Nursing Facility Stays after 100 days; and
- Chronic Disease and Rehabilitation Hospitals after 100 days.

These services are provided directly by MassHealth and are available to eligible MassHealth members. Providers should continue to refer MassHealth members who they believe are eligible for these services to individual Adult Foster Care, Group Adult Foster Care, Adult Day Health, and Day Habilitation providers and Personal Care Management agencies as they do today. For more information about these and other long term services and supports please consult <https://www.massoptions.org/massoptions/find-community-long-term-supports-and-services>.

Continuity of Care (CoC)



Inpatient Hospitalization – Medical and Behavioral Health

Inpatient hospitalizations and 24-hour diversionary services for behavioral health that have been authorized by the plan in effect before March 1, 2018, must be honored by the new plan.

MassHealth (for Primary Care ACOs and the PCC Plan), Accountable Care Partnership Plans, and MCOs must pay for any inpatient stays that were authorized by the member's plan in effect before March 1, 2018, and that are in place at the time of transition. The new plan becomes responsible for payment for days in the hospital on the effective date of enrollment in the plan. The new plan is also responsible for conducting concurrent review, as well as coordinating discharge planning and follow-up care with the hospital. Inpatient hospital providers should reach out to new plans for inpatient hospitalizations that were scheduled, but not yet submitted and reviewed for authorization by the previous plan. If the new plan has an authorization requirement, the request should be submitted to the new plan for review. Similarly, authorizations that are pending, but not yet finalized, should be submitted to the new plan for review.

Inpatient stays and 24-hour diversionary services must continue to be covered by the new plan until the member is medically cleared for discharge.



Continuity of Care (CoC)

What Members Can Do If They Have Concerns About Their Care During the Transition

Members who have concerns or questions about their continuity of care are encouraged to work with their new plans and health care providers to confirm or obtain authorizations for health care services that they are receiving at the time of transition. There are a number of steps members may take to ensure a smooth transition if they have concerns or specific health needs:

- Contact their new plan. Members should let their new plan know about any planned visits with their primary care provider, specialists, and behavioral health providers, as well as any authorized hospitalizations and medications they are currently taking. The member's new plan can verify if existing providers will be covered beyond the 30-day continuity of care period, help the member find new providers if necessary, and coordinate any prior authorizations needed.
- Contact their primary care providers, specialists, and behavioral health providers to let them know about their new health plan. The providers should verify if they are part of that new health plan's provider network, or if they are in another health plan's network.
- Contact MassHealth at 1-800-841-2900. If members want help selecting or enrolling in a plan that contracts with a particular provider, MassHealth can provide that information, and help the member select and change plans. Members should also call MassHealth if they have an urgent situation that is not being addressed by their new plan.



Continuity of Care (CoC)

Escalation Protocols for Continuity of Care Concerns

Even with all best efforts, it is not possible to know in advance of all situations in which members will require assistance during this transition. For example:

- Members may face new, urgent medical situations;
- Members may be new to MassHealth and have unknown medical needs;
- Claims data used to help determine a member's health needs may be unavailable;
- Data may not reflect a particular urgency that is felt by a given member; or
- Members may have had trouble understanding information provided in any written notices from MassHealth or their new plan.

For these reasons, MassHealth has established continuity of care escalation protocols with ACOs and MCOs for continuity of care concerns or issues during the transition. Members, and those assisting members, should contact the new plan for any continuity of care concerns or issues. Contact information for the new plans is provided on page 45.

In addition, member appeals processes will continue to be available, both through the new plan and through MassHealth's Board of Hearings. If the plan chooses to modify or terminate a prior authorization or prior approval, the plan must treat the modification or termination as an Adverse Action and follow the appeal rights policy and procedures, including advance notice by the plan to the member and aid paid pending the outcome of the appeal at the Board of Hearings.

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Eligibility Verification System (EVS)

- Providers should continue to check member enrollment and eligibility using EVS* on the Provider Online Service Center (POSC)
- Providers reduce the risk of denied claims by using EVS to verify member enrollment and eligibility prior to providing services to MassHealth members
- There are two types of Restrictive Messages that appear on EVS:
 - Eligibility Restrictive Messages (No Changes)
 - Managed Care Data Restrictive Messages (Enhanced)
- Effective March 1, 2018, the Managed Care Data Restrictive Messages will be enhanced to identify which type of health plan a member is enrolled in, and their contact information for inquiries regarding:
 - Billing (medical and behavioral health claims)
 - Service authorizations (medical and behavioral health services)
 - Behavioral Health vendors

If you have questions about how to check a member's eligibility, please refer to the [Verify Member Eligibility Job Aid](#) to learn how to access and check member eligibility using EVS on the POSC

(URL: <https://www.mass.gov/how-to/check-member-eligibility>)

*Note: EVS only displays a member's **current** eligibility, not prospective eligibility. If a member is changing health plans on March 1, 2018, their new enrollment and the corresponding messages will not be visible until that date.



EVS – Eligibility Tab

May 26, 2017

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Member Information **Eligibility** 1.

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID 123456789100

Date Range	Eligibility Status
05/24/2017 05/24/2017 2.	MASSHEALTH STANDARD

Close Perform Another Eligibility Check

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1. To verify the coverage type a member has, click on the *Eligibility* tab.

2. Click on the hyperlink of the Date Range* entered for details regarding the member's coverage.

*Note: EVS only displays a member's **current** eligibility, not prospective eligibility. If a member is changing health plans on March 1, 2018 their new enrollment and the corresponding messages will not be visible until that date.

1. BeHealthy Partnership – Accountable Care Partnership Plan



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Verify Member Eligibility

Member Information

Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/07/2018 02/07/2018	MASSHEALTH STANDARD

The information below refers to the MASSHEALTH STANDARD coverage for 02/07/2018 to 02/07/2018.

Eligibility Restrictive Messages

Restrictive Messages

991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ BEHEALTHY PARTNERSHIP		(800) 786-9999	02/07/2018 02/07/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 02/07/2018

End Date 02/07/2018

Name BEHEALTHY PARTNERSHIP

NPI

Phone (800) 786-9999

1573 / 688 BeHealthy Partnership member. BeHealthy Partnership is an Accountable Care Partnership Plan.

Restrictive Messages

1574 / 689 For medical service questions, call 1-800-786-9999.
1575 / 690 For behavioral health service questions and authorizations, call Massachusetts Behavioral Health Partnership at 1-800-495-0086.
1576 / 691 For claims, policy, or billing questions, call 1-800-786-9999.

Member Payment Responsibility Detail

Patient Paid Amount

Patient Paid Amount Type

Spend Down Amount

Deductible Amount

Deductible Date

Co-pay Status

Co-pay Cap Status

Restrictive Messages

Close

Perform Another Eligibility Check

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

2. Berkshire Fallon Health Collaborative – Accountable Care Partnership Plan



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Verify Member Eligibility

Member Information

Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
02/07/2018 02/07/2018	CAREPLUS

The information below refers to the CAREPLUS coverage for 02/07/2018 to 02/07/2018.

Eligibility Restrictive Messages

Restrictive Messages

1539 / 991 Certain HSN dental services available at community health centers and hospital-based health centers.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
BERKSHIRE FALLON HEALTH COLLABORATI		(855) 203-4660	02/07/2018 02/07/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 02/07/2018
End Date 02/07/2018

Name BERKSHIRE FALLON HEALTH COLLABORATI

NPI
Phone (855) 203-4660

1577 / 692 Berkshire Fallon Health Collaborative member. Berkshire Fallon Health Collaborative is an Accountable Care Partnership Plan.

Restrictive Messages

1578 / 693 For medical service questions, call 1-855-203-4660.
1579 / 694 For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-877-7184.
1580 / 695 For claims, policy, or billing questions, call 1-855-203-4660.

Member Payment Responsibility Detail

Patient Paid Amount
Patient Paid Amount Type

Spend Down Amount

Deductible Amount
Deductible Date

Co-pay Status
Co-pay Cap Status

Restrictive Messages

Close

Perform Another Eligibility Check

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

3. BMC HealthNet Plan Community Alliance – Accountable Care Partnership Plan



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Member Information		Eligibility	
Dates of Eligibility			
Click on the Date Range to view Eligibility information for Member ID			
	Date Range	Eligibility Status	
→	02/05/2018 02/05/2018	MASSHEALTH STANDARD	
The information below refers to the MASSHEALTH STANDARD coverage for 02/05/2018 to 02/05/2018.			
Eligibility Restrictive Messages			
Restrictive Messages	991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.		
List of Managed Care Data (for MCO/ACO)			
	Name	NPI	Phone Date Range
→	BMC HEALTHNET PLAN COMMUNITY ALLIAN		(888) 566-0010 02/05/2018 02/05/2018
Managed Care Data (for MCO/ACO) Details			
Begin Date 02/05/2018		End Date 02/05/2018	
Name BMC HEALTHNET PLAN COMMUNITY ALLIAN			
NPI		Phone (888) 566-0010	
Restrictive Messages 1581 / 696 BMC HealthNet Plan Community Alliance member. BMC HealthNet Plan Community Alliance is an Accountable Care Partnership Plan. 1582 / 697 For medical service questions, call 1-888-566-0010. 1583 / 698 For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501. 1584 / 699 For claims, policy, or billing questions, call 1-888-566-0010.			
Member Payment Responsibility Detail			
Patient Paid Amount		Patient Paid Amount Type	
Spend Down Amount			
Deductible Amount		Deductible Date	
Co-pay Status		Co-pay Cap Status	
Restrictive Messages			
Close		Perform Another Eligibility Check	

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

4. BMC HealthNet Plan Mercy Alliance – Accountable Care Partnership Plan



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Member Information		Eligibility	
Dates of Eligibility			
Click on the Date Range to view Eligibility information for Member ID			
Date Range	Eligibility Status		
➔ 02/07/2018 02/07/2018	MASSHEALTH STANDARD		
The information below refers to the MASSHEALTH STANDARD coverage for 02/07/2018 to 02/07/2018.			
Eligibility Restrictive Messages			
Restrictive Messages	991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.		
List of Managed Care Data (for MCO/ACO)			
Name	NPI	Phone	Date Range
➔ BMC HEALTHNET PLAN MERCY ALLIANCE		(888) 566-0010	02/07/2018 02/07/2018
Managed Care Data (for MCO/ACO) Details			
Begin Date	02/07/2018		End Date 02/07/2018
Name BMC HEALTHNET PLAN MERCY ALLIANCE			
NPI		Phone (888) 566-0010	
1585 / 700 BMC HealthNet Plan Mercy Alliance member. BMC HealthNet Plan Mercy Alliance is an Accountable Care Partnership Plan.			
1586 / 701 For medical service questions, call 1-888-566-0010.			
Restrictive Messages	1587 / 702 For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.		
1588 / 703 For claims, policy, or billing questions, call 1-888-566-0010.			
Member Payment Responsibility Detail			
Patient Paid Amount	Patient Paid Amount Type		
Spend Down Amount			
Deductible Amount	Deductible Date		
Co-pay Status	Co-pay Cap Status		
Restrictive Messages			
Close		Perform Another Eligibility Check	

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

5. BMC HealthNet Plan Signature Alliance – Accountable Care Partnership Plan



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Verify Member Eligibility

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Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/07/2018 02/07/2018	MASSHEALTH STANDARD

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Eligibility Restrictive Messages

Restrictive Messages 991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ BMC HEALTHNET PLAN SIGNATURE ALLIAN		(888) 566-0010	02/07/2018 02/07/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 02/07/2018

End Date 02/07/2018

Name BMC HEALTHNET PLAN SIGNATURE ALLIAN

NPI

Phone (888) 566-0010

Restrictive Messages

1589 / 704 BMC HealthNet Plan Signature Alliance member. BMC HealthNet Plan Signature Alliance is an Accountable Care Partnership Plan.
1590 / 705 For medical service questions, call 1-888-566-0010.
1591 / 706 For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.
1592 / 707 For claims, policy, or billing questions, call 1-888-566-0010.

Member Payment Responsibility Detail

Patient Paid Amount

Patient Paid Amount Type

Spend Down Amount

Deductible Amount

Deductible Date

Co-pay Status

Co-pay Cap Status

Restrictive Messages

Close

Perform Another Eligibility Check

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

6. BMC HealthNet Plan Southcoast Alliance – Accountable Care Partnership Plan



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Verify Member Eligibility

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Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/01/2018 02/01/2018	MASSHEALTH STANDARD

The information below refers to the **MASSHEALTH STANDARD** coverage for **02/01/2018 to 02/01/2018**.

Eligibility Restrictive Messages

Restrictive Messages

246 / 246 EXEMPT FROM COPAY ON PHARMACY SERVICES UNDER 130 CMR 450.130(D).
186 / 186 EXEMPT FROM COPAY ON NON-PHARMACY SERVICES UNDER 130 CMR 450.130(D).

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ BMC HEALTHNET PLAN SOUTHCOAST ALLIA		(888) 566-0010	02/01/2018 02/01/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 02/01/2018
End Date 02/01/2018

Name BMC HEALTHNET PLAN SOUTHCOAST ALLIA

NPI
Phone (888) 566-0010

Restrictive Messages

1593 / 708 BMC HealthNet Plan Southcoast Alliance member. BMC HealthNet Plan Southcoast Alliance is an Accountable Care Partnership Plan.
1594 / 709 For medical service questions, call 1-888-566-0010.
1595 / 710 For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.
1596 / 711 For claims, policy, or billing questions, call 1-888-566-0010.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status

Restrictive Messages

Close

Perform Another Eligibility Check

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

7. Fallon 365 Care – Accountable Care Partnership Plan



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Verify Member Eligibility

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Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/07/2018 02/07/2018	MASSHEALTH STANDARD

The information below refers to the **MASSHEALTH STANDARD** coverage for **02/07/2018 to 02/07/2018**.

Eligibility Restrictive Messages

Restrictive Messages 991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ FALLON 365 CARE		(855) 508-3390	02/07/2018 02/07/2018

Managed Care Data (for MCO/ACO) Details

Begin Date	02/07/2018	End Date	02/07/2018
Name FALLON 365 CARE			
NPI		Phone (855) 508-3390	
Restrictive Messages <p>1597 / 712 Fallon 365 Care member. Fallon 365 Care is an Accountable Care Partnership Plan.</p> <p>1598 / 713 For medical service questions, call 1-855-508-3390.</p> <p>1599 / 714 For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-877-7182.</p> <p>1600 / 715 For claims, policy, or billing questions, call 1-855-508-3390.</p>			

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status
Restrictive Messages	

Close
Perform Another Eligibility Check

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

8. My Care Family – Accountable Care Partnership Plan



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Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/07/2018 02/07/2018	MASSHEALTH STANDARD

The information below refers to the **MASSHEALTH STANDARD** coverage for **02/07/2018** to **02/07/2018**.

Eligibility Restrictive Messages

Restrictive Messages 991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ MY CARE FAMILY		(800) 462-5449	02/07/2018 02/07/2018

Managed Care Data (for MCO/ACO) Details

Begin Date	02/07/2018	End Date	02/07/2018
Name MY CARE FAMILY			
NPI		Phone (800) 462-5449	
<p>1601 / 716 My Care Family member. My Care Family is an Accountable Care Partnership Plan.</p> <p>1602 / 717 For medical service questions, call 1-800-462-5449.</p> <p>Restrictive Messages 1603 / 718 For behavioral health service questions and authorizations, call Beacon Health Options at 1-800-414-2820.</p> <p>1604 / 719 For claims, policy, or billing questions, call 1-800-462-5449.</p>			

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status
Restrictive Messages	

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Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

9. Tufts Health Together with Atrius Health – Accountable Care Partnership Plan



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Verify Member Eligibility

Member Information

Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
02/12/2018 02/12/2018	MASSHEALTH STANDARD

The information below refers to the **MASSHEALTH STANDARD** coverage for 02/12/2018 to 02/12/2018.

Eligibility Restrictive Messages

Restrictive Messages

991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
TUFTS HEALTH TOGETHER WITH ATRIUS H		(888) 257-1985	02/12/2018 02/12/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 02/12/2018
End Date 02/12/2018

Name TUFTS HEALTH TOGETHER WITH ATRIUS H

NPI
Phone (888) 257-1985

1605 / 720 Tufts Health Together with Atrius Health member. Tufts Health Together With Atrius Health is an Accountable Care Partnership Plan.

Restrictive Messages

1606 / 721 For medical service questions, call 1-888-257-1985.
1607 / 722 For behavioral health service questions and authorizations, call Tufts Health Together With Atrius at 1-888-257-1985.
1608 / 723 For claims, policy, or billing questions, call 1-888-257-1985.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status

Restrictive Messages

Close

Perform Another Eligibility Check

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

10. Tufts Health Together with BIDCO – Accountable Care Partnership Plan



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Member Information		Eligibility	
Dates of Eligibility			
Click on the Date Range to view Eligibility information for Member ID			
	Date Range	Eligibility Status	
	→ 02/05/2018 02/05/2018	MASSHEALTH STANDARD	
The information below refers to the MASSHEALTH STANDARD coverage for 02/05/2018 to 02/05/2018.			
Eligibility Restrictive Messages			
Restrictive Messages	246 / 246 EXEMPT FROM COPAY ON PHARMACY SERVICES UNDER 130 CMR 450.130(D). 186 / 186 EXEMPT FROM COPAY ON NON-PHARMACY SERVICES UNDER 130 CMR 450.130(D).		
List of Managed Care Data (for MCO/ACO)			
	Name	NPI	Phone
	→ TUFTS HEALTH TOGETHER WITH BIDCO		(888) 257-1985
Managed Care Data (for MCO/ACO) Details			
Begin Date 02/05/2018		End Date 02/05/2018	
Name TUFTS HEALTH TOGETHER WITH BIDCO			
NPI		Phone (888) 257-1985	
Restrictive Messages	1609 / 724 Tufts Health Together with BIDCO member. Tufts Health Together with BIDCO is an Accountable Care Partnership Plan. 1610 / 725 For medical service questions, call 1-888-257-1985. 1611 / 726 For behavioral health service questions and authorizations, call Tufts Health Together with BIDCO at 1-888-257-1985. 1612 / 727 For claims, policy, or billing questions, call 1-888-257-1985.		
Member Payment Responsibility Detail			
Patient Paid Amount	Patient Paid Amount Type		
Spend Down Amount	Deductible Date		
Deductible Amount	Co-pay Cap Status		
Co-pay Status	Restrictive Messages		
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Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

11. Tufts Health Together with Boston Children's ACO – Accountable Care Partnership Plan



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Verify Member Eligibility

Member Information Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/07/2018 02/07/2018	MASSHEALTH FAMILY ASSISTANCE

The information below refers to the MASSHEALTH FAMILY ASSISTANCE coverage for 02/07/2018 to 02/07/2018.

Eligibility Restrictive Messages

Restrictive Messages 991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ TUFTS HEALTH TOGETHER WITH BOSTON C		(888) 257-1985	02/07/2018 02/07/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 02/07/2018 End Date 02/07/2018

Name TUFTS HEALTH TOGETHER WITH BOSTON C

NPI Phone (888) 257-1985

1613 / 728 Tufts Health Together With Boston Children's ACO member. Tufts Health Together With Boston Children's ACO is an Accountable Care Partnership Plan.

Restrictive Messages 1614 / 729 For medical service questions, call 1-888-257-1985.

1615 / 730 For behavioral health service questions and authorizations, call Tufts Health Together With Boston Children's ACO at 1-888-257-1985.

1616 / 731 For claims, policy, or billing questions, call 1-888-257-1985.

Member Payment Responsibility Detail

Patient Paid Amount	Patient Paid Amount Type
Spend Down Amount	
Deductible Amount	Deductible Date
Co-pay Status	Co-pay Cap Status
Restrictive Messages	

Close Perform Another Eligibility Check

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

12. Tufts Health Together with CHA – Accountable Care Partnership Plan



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Verify Member Eligibility

Member Information

Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/07/2018 02/07/2018	MASSEALTH STANDARD

The information below refers to the MASSEALTH STANDARD coverage for 02/07/2018 to 02/07/2018.

Eligibility Restrictive Messages

Restrictive Messages

991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ TUFTS HEALTH TOGETHER WITH CHA		(888) 257-1985	02/07/2018 02/07/2018

Managed Care Data (for MCO/ACO) Details

Begin Date

02/07/2018

End Date

02/07/2018

Name

TUFTS HEALTH TOGETHER WITH CHA

NPI

Phone

(888) 257-1985

Restrictive Messages

1618 / 732 Tufts Health Together With CHA member. Tufts Health Together With CHA is an Accountable Care Partnership Plan.
1619 733 For medical service questions, call 1-888-257-1985.
1620 / 734 For behavioral health service questions and authorizations, call Tufts Health Together With CHA at 1-888-257-1985.
1621 735 For claims, policy, or billing questions, call 1-888-257-1985.

Member Payment Responsibility Detail

Patient Paid Amount

Patient Paid Amount Type

Spend Down Amount

Deductible Amount

Deductible Date

Co-pay Status

Co-pay Cap Status

Restrictive Messages

Close

Perform Another Eligibility Check

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

13. Wellforce Care Plan – Accountable Care Partnership Plan



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Verify Member Eligibility

Member Information

Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
→ 02/07/2018 02/07/2018	MASSEALTH STANDARD

The information below refers to the **MASSEALTH STANDARD** coverage for 02/07/2018 to 02/07/2018.

Eligibility Restrictive Messages

Restrictive Messages

991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
→ WELLFORCE CARE PLAN		(855) 508-4715	02/07/2018 02/07/2018

Managed Care Data (for MCO/ACO) Details

Begin Date 02/07/2018

End Date 02/07/2018

Name WELLFORCE CARE PLAN

NPI

Phone (855) 508-4715

Restrictive Messages

1622 / 736 Wellforce Care Plan member. Wellforce Care Plan is an Accountable Care Partnership Plan.
1623 / 737 For medical service questions, call 1-855-508-4715.
1624 / 738 For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-877-7183
1625 / 739 For claims, policy, or billing questions, call 1-855-508-4715.

Member Payment Responsibility Detail

Patient Paid Amount

Patient Paid Amount Type

Spend Down Amount

Deductible Amount

Deductible Date

Co-pay Status

Co-pay Cap Status

Restrictive Messages

Close

Perform Another Eligibility Check

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

1. Community Care Cooperative (C3) – Primary Care ACO Plan



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Verify Member Eligibility

Member Information Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
02/12/2018 02/12/2018	MASSHEALTH STANDARD

The information below refers to the MASSHEALTH STANDARD coverage for 02/12/2018 to 02/12/2018.

List of Managed Care Data (for PCC/PCCB)

Legal Name	Site Name	Site Phone	Date Range
EAST MOUNTAIN MEDICAL ASS	EAST MOUNTAIN MEDICAL	(413) 528-2418	02/12/2018 02/12/2018

Managed Care Data (for PCC/PCCB) Details

Begin Date	02/12/2018	End Date	02/12/2018
Legal Name	EAST MOUNTAIN MEDICAL ASS		
Site/DBA Name	EAST MOUNTAIN MEDICAL		
NPI	1033278486	Site Phone	(413) 528-2418
Site Address	780 MAIN ST STE 1 GT BARRINGTON, MA 01230		
Restrictive Messages	687 / 687 COMMUNITY CARE COOPERATIVE MEMBER. COMMUNITY CARE COOPERATIVE IS A PRIMARY CARE ACO. CALL PCC ABOVE FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).		

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
COMMUNITY CARE COOPERATIVE (C3)	(866) 676-9226		02/12/2018 02/12/2018

Managed Care Data (for MCO/ACO) Details

Begin Date	02/12/2018	End Date	02/12/2018
Name	COMMUNITY CARE COOPERATIVE (C3)		
NPI		Phone	(866) 676-9226
Restrictive Messages	1626 / 740 Community Care Cooperative (C3) member. Community Care Cooperative is a Primary Care ACO. 1627 / 741 For medical service questions, call 1-866-676-9226. 1628 / 742 For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.		

List of Behavioral Health

Provider Name	NPI	Provider Phone	Date Range
MASSACHUSETTS BEH HLTH PRT	1548385067	(800) 495-0086	02/12/2018 02/12/2018

Behavioral Health Detail

Begin Date	02/12/2018	End Date	02/12/2018
Provider Name	MASSACHUSETTS BEH HLTH PRT		
NPI	1548385067	Provider Phone	(800) 495-0086
Restrictive Messages	76 / 525 For behavioral health service questions and authorization, call the Massachusetts Behavioral Health Partnership at 1-800-495-0086.		

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

2. Partners Healthcare Choice – Primary Care ACO Plan



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Member Information		Eligibility	
Dates of Eligibility			
Click on the Date Range to view Eligibility information for Member ID			
Date Range	Eligibility Status		
→ 02/12/2018 02/12/2018	MASSHEALTH STANDARD		
The information below refers to the MASSHEALTH STANDARD coverage for 02/12/2018 to 02/12/2018.			
Eligibility Restrictive Messages			
Restrictive Messages	991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.		
List of Managed Care Data (for PCC/PCCB)			
Legal Name	Site Name	Site Phone	Date Range
→ BRIGHAM & WOMEN'S PHYSICIA	BRIGHAM AND WOMEN'S PRIMARY CARE AS	(857) 307-2200	02/12/2018 02/12/2018
Managed Care Data (for PCC/PCCB) Details			
Begin Date	02/12/2018	End Date	02/12/2018
Legal Name	BRIGHAM & WOMEN'S PHYSICIA		
Site/DBA Name	BRIGHAM AND WOMEN'S PRIMARY CARE AS		
NPI	1033535497	Site Phone	(857) 307-2200
Site Address	600 HUNTINGTON AVE		
	BOSTON, MA 02115		
Restrictive Messages	686 / 686 PARTNERS HEALTHCARE CHOICE MEMBER. PARTNERS HEALTHCARE CHOICE IS A PRIMARY CARE ACO. CALL THE PCC ABOVE FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).		
List of Managed Care Data (for MCO/ACO)			
Name	NPI	Phone	Date Range
→ PARTNERS HEALTHCARE CHOICE		(800) 231-2722	02/12/2018 02/12/2018
Managed Care Data (for MCO/ACO) Details			
Begin Date	02/12/2018	End Date	02/12/2018
Name	PARTNERS HEALTHCARE CHOICE		
NPI		Phone	(800) 231-2722
Restrictive Messages	1629 / 743 Partners HealthCare Choice member. Partners HealthCare Choice is a Primary Care ACO. 1630 / 744 For medical service questions, call 1-800-231-2722. 1631 / 745 For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.		
List of Behavioral Health			
Provider Name	NPI	Provider Phone	Date Range
→ MASSACHUSETTS BEH HLTH PRT	1548385057	(800) 495-0086	02/12/2018 02/12/2018
Behavioral Health Detail			
Begin Date	02/12/2018	End Date	02/12/2018
Provider Name	MASSACHUSETTS BEH HLTH PRT		
NPI	1548385057	Provider Phone	(800) 495-0086
Restrictive Messages	76 / 525 For behavioral health service questions and authorization, call the Massachusetts Behavioral Health Partnership at 1-800-495-0086.		

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

3. Steward Health Choice – Primary Care ACO Plan



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Verify Member Eligibility

Member Information

Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
02/12/2018 02/12/2018	MASSHEALTH STANDARD

The information below refers to the MASSHEALTH STANDARD coverage for 02/12/2018 to 02/12/2018.

Eligibility Restrictive Messages

Restrictive Messages

991 / 991 CERTAIN HSN DENTAL SERVICES AVAILABLE AT COMMUNITY HEALTH CENTERS AND HOSPITAL-BASED HEALTH CENTERS.

List of Managed Care Data (for PCC/PCCB)

Legal Name	Site Name	Site Phone	Date Range
ELM ST ADULT MEDICINE_PC	ELM ST ADULT MEDICINE_PC	(413) 586-1100	02/12/2018 02/12/2018

Managed Care Data (for PCC/PCCB) Details

Begin Date

02/12/2018

End Date

02/12/2018

Legal Name

ELM ST ADULT MEDICINE_PC

Site/DBA Name

ELM ST ADULT MEDICINE_PC

NPI

1306914601

Site (413) 586-Phone

1100

Site Address

264 ELM ST STE 10-12

NORTHAMPTON, MA 01060

Restrictive Messages

685 / 685 STEWARD HEALTH CHOICE MEMBER. STEWARD HEALTH CHOICE IS A PRIMARY CARE ACO. CALL THE PCC ABOVE FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).

List of Managed Care Data (for MCO/ACO)

Name	NPI	Phone	Date Range
STEWARD HEALTH CHOICE	(855) 860-4949		02/12/2018 02/12/2018

Managed Care Data (for MCO/ACO) Details

Begin Date

02/12/2018

End Date

02/12/2018

Name

STEWARD HEALTH CHOICE

NPI

Phone

(855) 860-4949

Restrictive Messages

1632 / 746 Steward Health Choice member. Steward Health Choice is a Primary Care ACO.
1633 / 747 For medical service questions, call 1-855-860-4949.
1634 / 748 For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.

List of Behavioral Health

Provider Name	NPI	Provider Phone	Date Range
MASSACHUSETTS BEH HLTH PRT	1548385057	(800) 495-0086	02/12/2018 02/12/2018

Behavioral Health Detail

Begin Date

02/12/2018

End Date

02/12/2018

Provider Name

MASSACHUSETTS BEH HLTH PRT

NPI

1548385057

Provider (800) 495-Phone

0086

Restrictive Messages

76 / 525 For behavioral health service questions and authorization, call the Massachusetts Behavioral Health Partnership at 1-800-495-0086.

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

Primary Care Clinician (PCC) Plan and Behavioral Health



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Verify Member Eligibility

Member Information

Eligibility

Dates of Eligibility

Click on the Date Range to view Eligibility information for Member ID

Date Range	Eligibility Status
02/08/2018 02/08/2018	MASSHEALTH STANDARD

The information below refers to the MASSHEALTH STANDARD coverage for 02/08/2018 to 02/08/2018.

Eligibility Restrictive Messages

Restrictive Messages

246 / 246 EXEMPT FROM COPAY ON PHARMACY SERVICES UNDER 130 CMR 450.130(D).

186 / 186 EXEMPT FROM COPAY ON NON-PHARMACY SERVICES UNDER 130 CMR 450.130(D).

List of Managed Care Data (for PCC/PCCB)

Legal Name	Site Name	Site Phone	Date Range
HOLYOKE HEALTH CENTER INC	HOLYOKE HEALTH CENTER	(413) 420-2200	02/08/2018 02/08/2018

Managed Care Data (for PCC/PCCB) Details

Begin Date 02/08/2018

End Date 02/08/2018

Legal Name HOLYOKE HEALTH CENTER INC

Site/DBA Name HOLYOKE HEALTH CENTER

NPI 1740271022

Site (413) 420-2200

Site Address 230 MAPLE ST
PO BOX 6260
HOLYOKE, MA 01040

Restrictive Messages 461 / 461 PRIMARY CARE CLINICIAN (PCC) PLAN MEMBER. CALL PCC FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).

List of Behavioral Health

Provider Name	NPI	Provider Phone	Date Range
MASSACHUSETTS BEH HLTH PRT	1548385057	(800) 495-0086	02/12/2018 02/12/2018

Behavioral Health Detail

Begin Date 02/12/2018

End Date 02/12/2018

Provider Name MASSACHUSETTS BEH HLTH PRT

NPI 1548385057

Provider (800) 495-0086

Restrictive Messages 76 / 525 For behavioral health service questions and authorization, call the Massachusetts Behavioral Health Partnership at 1-800-495-0086.

Member Payment Responsibility Detail

Patient Paid Amount

Patient Paid Amount Type

Spend Down Amount

Deductible Amount

Deductible Date

Co-pay Status

Co-pay Cap Status

Restrictive Messages

Close

Perform Another Eligibility Check

Note: EVS only displays a member's **current** eligibility, not prospective eligibility.

If a member enrolls in a health plan effective March 1, 2018 their new Plan assignment and corresponding messages will not appear in EVS until the date the enrollment takes effect.

EVS Codes and Restrictive Messages for Managed Care Health Plans - Effective March 1, 2018



Accountable Care Partnership Plans		
BeHealthy Partnership		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
1573	688	BeHealthy Partnership member. BeHealthy Partnership is an Accountable Care Partnership Plan.
1574	689	For medical service questions call 1-800-786-9999.
1575	690	For behavioral health service questions and authorizations, call Massachusetts Behavioral Health Partnership at 1-800-495-0086.
1576	691	For claims, policy, or billing questions, call 1-800-786-9999.
Berkshire Fallon Health Collaborative		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
1577	692	Berkshire Fallon Health Collaborative member. Berkshire Fallon Health Collaborative is an Accountable Care Partnership Plan.
1578	693	For medical service questions call 1-855-203-4660
1579	694	For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-877-7184.
1580	695	For claims, policy, or billing questions, call 1-855-203-4660.
BMC HealthNet Plan Community Alliance		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
1581	696	BMC HealthNet Plan Community Alliance member. BMC HealthNet Plan Community Alliance is an Accountable Care Partnership Plan.
1582	697	For medical service questions call 1-888-566-0010.
1583	698	For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.
1584	699	For claims, policy, or billing questions, call 1-888-566-0010.
BMC HealthNet Plan Mercy Alliance		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
1585	700	BMC HealthNet Plan Mercy Alliance member. BMC HealthNet Plan Mercy Alliance is an Accountable Care Partnership Plan.
1586	701	For medical service questions call 1-888-566-0010.
1587	702	For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.
1588	703	For claims, policy, or billing questions, call 1-888-566-0010.

EVS Codes and Restrictive Messages for Managed Care Health Plans - Effective March 1, 2018



Accountable Care Partnership Plans		
BMC HealthNet Plan Signature Alliance		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
1589	704	BMC HealthNet Plan Signature Alliance member. BMC HealthNet Plan Signature Alliance is an Accountable Care Partnership Plan.
1590	705	For medical service questions call 1-888-566-0010.
1591	706	For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.
1592	707	For claims, policy, or billing questions, call 1-888-566-0010.
BMC HealthNet Plan Southcoast Alliance		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
1593	708	BMC HealthNet Plan Southcoast Alliance member. BMC HealthNet Plan Southcoast Alliance is an Accountable Care Partnership Plan.
1594	709	For medical service questions call 1-888-566-0010.
1595	710	For behavioral health service questions and authorizations, call Beacon Health Strategies at 1-888-217-3501.
1596	711	For claims, policy, or billing questions, call 1-888-566-0010.
Fallon 365 Care		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
1597	712	Fallon 365 Care member. Fallon 365 Care is an Accountable Care Partnership Plan.
1598	713	For medical service questions call 1-855-508-3390.
1599	714	For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-877-7182.
1600	715	For claims, policy, or billing questions, call 1-855-508-3390.
My Care Family		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
1601	716	My Care Family member. My Care Family is an Accountable Care Partnership Plan.
1602	717	For medical service questions call 1-800-462-5449.
1603	718	For behavioral health service questions and authorizations, call Beacon Health Options at 1-800-414-2820.
1604	719	For claims, policy, or billing questions, call 1-800-462-5449.
Tufts Health Together with Atrius Health		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
1605	720	Tufts Health Together with Atrius Health member. Tufts Health Together with Atrius Health is an Accountable Care Partnership Plan.
1606	721	For medical service questions call 1-888-257-1985.
1607	722	For behavioral health service questions and authorizations, call Tufts Health Together with Atrius Health at 1-888-257-1985.
1608	723	For claims, policy, or billing questions, call 1-888-257-1985.

EVS Codes and Restrictive Messages for Managed Care Health Plans - Effective March 1, 2018



Accountable Care Partnership Plans		
Tufts Health Together with BIDCO		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
1609	724	Tufts Health Together with BIDCO member. Tufts Health Together with BIDCO is an Accountable Care Partnership Plan.
1610	725	For medical service questions call 1-888-257-1985.
1611	726	For behavioral health service questions and authorizations, call Tufts Health Together with BIDCO at 1-888-257-1985.
1612	727	For claims, policy, or billing questions, call 1-888-257-1985.
Tufts Health Together with Boston Children's ACO		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
1613	728	Tufts Health Together with Boston Children's ACO member. Tufts Health Together with Boston Children's ACO is an Accountable Care Partnership Plan.
1614	729	For medical service questions call 1-888-257-1985.
1615	730	For behavioral health service questions and authorizations, call Tufts Health Together with Boston Children's ACO at 1-888-257-1985.
1616	731	For claims, policy, or billing questions, call 1-888-257-1985.
Tufts Health Together with CHA		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
1618	732	Tufts Health Together with CHA member. Tufts Health Together with CHA is an Accountable Care Partnership Plan.
1619	733	For medical service questions call 1-888-257-1985.
1620	734	For behavioral health service questions and authorizations, call Tufts Health Together with CHA at 1-888-257-1985.
1621	735	For claims, policy, or billing questions, call 1-888-257-1985.
Wellforce Care Plan		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
1622	736	Wellforce Care Plan member. Wellforce Care Plan is an Accountable Care Partnership Plan.
1623	737	For medical service questions call 1-855-508-4715.
1624	738	For behavioral health service questions and authorizations, call Beacon Health Options at 1-888-877-7183.
1625	739	For claims, policy, or billing questions, call 1-855-508-4715.

EVS Codes and Restrictive Messages for Managed Care Health Plans - Effective March 1, 2018



Primary Care ACO Plans		
Community Care Cooperative (C3)		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
687	687	COMMUNITY CARE COOPERATIVE MEMBER. COMMUNITY CARE COOPERATIVE IS A PRIMARY CARE ACO. CALL PCC ABOVE FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).
1626	740	Community Care Cooperative (C3) member. Community Care Cooperative is a Primary Care ACO.
1627	741	For medical service questions call, 1-866-676-9226.
1628	742	For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.
76	525	For behavioral health service questions and authorizations, call Massachusetts Behavioral Health Partnership at 1-800-495-0086.
Partners HealthCare Choice		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
686	686	PARTNERS HEALTHCARE CHOICE MEMBER. PARTNERS HEALTHCARE CHOICE IS A PRIMARY CARE ACO. CALL THE PCC ABOVE FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).
1629	743	Partners HealthCare Choice member. Partners HealthCare Choice is a Primary Care ACO.
1630	744	For medical service questions call, 1-800-231-2722.
1631	745	For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.
76	525	For behavioral health service questions and authorizations, call Massachusetts Behavioral Health Partnership at 1-800-495-0086.
Steward Health Choice		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
685	685	STEWARD HEALTH CHOICE MEMBER. STEWARD HEALTH CHOICE IS A PRIMARY CARE ACO. CALL THE PCC ABOVE FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).
1632	746	Steward Health Choice member. Steward Health Choice is a Primary Care ACO.
1633	747	For medical service questions call, 1-855-860-4949.
1634	748	For claims, referrals, or billing questions, call the MassHealth Customer Service Center at 1-800-841-2900.
76	525	For behavioral health service questions and authorizations, call Massachusetts Behavioral Health Partnership at 1-800-495-0086.

EVS Codes and Restrictive Messages for Managed Care Health Plans - Effective March 1, 2018



Primary Care Clinician (PCC) Plan		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
461	461	PRIMARY CARE CLINICIAN (PCC) PLAN MEMBER. CALL PCC FOR AUTHORIZATION FOR ALL SERVICES EXCEPT THOSE LISTED IN 130 CMR 450.118(J).
461	461	For behavioral health service questions and authorization, call Massachusetts Behavioral Health Partnership at 1-800-495-0086.

MCO Plans		
BMC HealthNet Plan		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
1059	618	BMC HealthNet Plan member. BMC HealthNet Plan is an MCO.
747	021	For medical services call 1-888-566-0010. For behavioral health service questions and authorizations call Beacon Health Strategies at 1-888-217-3501.
Tufts Health Together		
EVS System Generated Message #	Unique Message #	EVS Restrictive Message Text – Effective March 1, 2018
1138	616	Tufts Health Together member. Tufts Health Together is an MCO.
1146	056	For medical services call 1-888-257-1985. For behavioral health service questions and authorizations call Tufts Health Together at 1-888-257-1985.



Payer of Claims Effective March 1, 2018

Plan Type	Payer of Claims
PCC Plan	MassHealth for non-BH services (<i>MBHP for BH services</i>)
Primary Care ACO	MassHealth for non-BH services (<i>MBHP for BH services</i>)
MCO	MCO*
MCO-Administered ACO	MCO*
Accountable Care Partnership Plan	Partnership Plan*

*If an MCO or Accountable Care Partnership Plan uses a Behavioral Health (BH) vendor, providers may be paid through the BH vendor for BH services.

Agenda








1. Provider Education and Communication Strategy
2. Overview of PCDI
3. Continuity of Care (CoC)
4. Eligibility Verification System (EVS)
- 5. Health Plan Contact Information**
6. Member Information and Resources
7. 2018 Provider Training & Education Schedule

Accountable Care Partnership Plans









MASSHEALTH HEALTH PLAN CONTACT INFORMATION – EFFECTIVE MARCH 1, 2018

ACCOUNTABLE CARE PARTNERSHIP PLANS	CUSTOMER SERVICE	BEHAVIORAL HEALTH SERVICES	MEMBER CARD IMAGE
BMC HealthNet Plan Community Alliance Boston ACO <i>in partnership with BMC HealthNet Plan</i> www.bmchp.org/community 	1-888-566-0010	Beacon Health Strategies 1-888-217-3501	 Member Name Member ID: B00123456 00 MassHealth ID#: 12345678901 Network: Community Alliance bmchp.org/community
BMC HealthNet Plan Mercy Alliance Mercy Medical Center <i>in partnership with BMC HealthNet Plan</i> www.bmchp.org/mercy 	1-888-566-0010	Beacon Health Strategies 1-888-217-3501	 Member Name Member ID: B00123456 00 MassHealth ID#: 12345678901 Network: Mercy Alliance bmchp.org/mercy
BMC HealthNet Plan Signature Alliance Signature Healthcare <i>in partnership with BMC HealthNet Plan</i> www.bmchp.org/signature 	1-888-566-0010	Beacon Health Strategies 1-888-217-3501	 Member Name Member ID: B00123456 00 MassHealth ID#: 12345678901 Network: Signature Alliance bmchp.org/signature

Accountable Care Partnership Plans




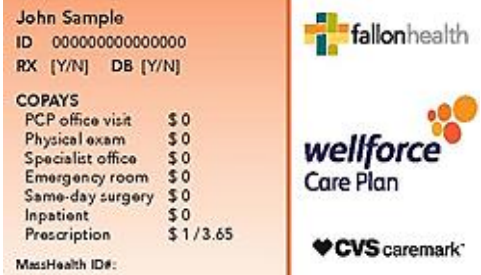



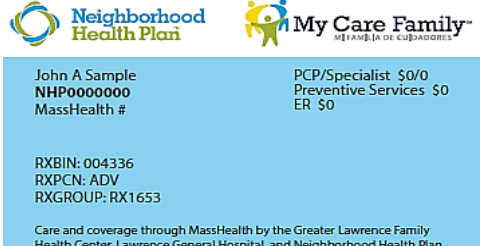
MASSHEALTH HEALTH PLAN CONTACT INFORMATION – EFFECTIVE MARCH 1, 2018

ACCOUNTABLE CARE PARTNERSHIP PLANS	CUSTOMER SERVICE	BEHAVIORAL HEALTH SERVICES	MEMBER CARD IMAGE
BMC HealthNet Plan Southcoast Alliance Southcoast Health <i>in partnership with BMC HealthNet Plan</i> www.bmchp.org/southcoast 	1-888-566-0010	Beacon Health Strategies 1-888-217-3501	
Berkshire Fallon Health Collaborative Health Collaborative of the Berkshires <i>in partnership with Fallon Health</i> www.fallonhealth.org/Berkshires 	1-855-203-4660	Beacon Health Strategies 1-888-877-7184	
Fallon 365 Care Reliant Medical Group <i>in partnership with Fallon Health</i> www.fallonhealth.org/365care 	1-855-508-3390	Beacon Health Options 1-888-877-7182	

Accountable Care Partnership Plans











MASSHEALTH HEALTH PLAN CONTACT INFORMATION – EFFECTIVE MARCH 1, 2018

ACCOUNTABLE CARE PARTNERSHIP PLANS	CUSTOMER SERVICE	BEHAVIORAL HEALTH SERVICES	MEMBER CARD IMAGE
Wellforce Care Plan Wellforce Care Plan <i>in partnership with Fallon Health</i> www.fallonhealth.org/wellforce 	1-855-508-4715	Beacon Health Options 1-888-877-7183	
Be Healthy Partnership Baystate Health Care Alliance <i>in partnership with Health New England</i> www.behealthypartnership.org 	1-800-786-9999	Massachusetts Behavioral Health Partnership (MBHP) www.masspartnership.com 1-800-495-0086	
My Care Family Merrimack Valley ACO <i>in partnership with Neighborhood Health Plan (NHP)</i> www.mycarefamily.org 	1-800-462-5449	Beacon Health Options 1-800-414-2820	

Accountable Care Partnership Plans






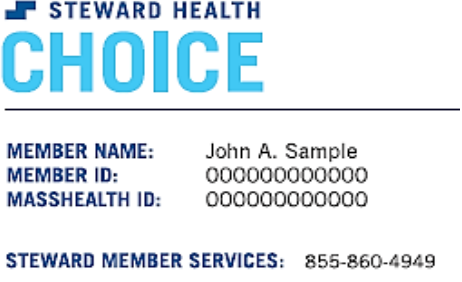


MASSHEALTH HEALTH PLAN CONTACT INFORMATION – EFFECTIVE MARCH 1, 2018

ACCOUNTABLE CARE PARTNERSHIP PLANS	CUSTOMER SERVICE	BEHAVIORAL HEALTH SERVICES	MEMBER CARD IMAGE
Tufts Health Together with Atrius Health Atrius Health <i>in partnership with Tufts Health Plan (THP)</i> www.TuftsHealthTogether.com/atriushealth 	1-888-257-1985	Tufts Health Together with Atrius Health 1-888-257-1985	 +  Tufts Health Together with Atrius Health A MassHealth Plan Member ID #: NXXXXXXXXXX MassHealth ID #: NXXXXXXXXXX Member: SUSAN A SAMPLE Pharmacy customer service: 000.000.0000 RXBIN: 000000 RXPCN: XXX RXGRP: RX0000 Member services: 888.257.1985 (TTY: 000.000.0000) TuftsHealthTogether.com/AtriusHealth
Tufts Health Together with BIDCO Beth Israel Deaconess Care Organization (BIDCO) <i>in partnership with Tufts Health Plan (THP)</i> www.TuftsHealthTogether.com/BIDCO 	1-888-257-1985	Tufts Health Together with BIDCO 1-888-257-1985	 +  Tufts Health Together with BIDCO A MassHealth Plan Member ID #: NXXXXXXXXXX MassHealth ID #: NXXXXXXXXXX Member: SUSAN A SAMPLE Pharmacy customer service: 000.000.0000 RXBIN: 000000 RXPCN: XXX RXGRP: RX0000 Member services: 888.257.1985 (TTY: 000.000.0000) TuftsHealthTogether.com/BIDCO
Tufts Health Together with Boston Children's ACO Boston Children's ACO <i>in partnership with Tufts Health Plan (THP)</i> www.TuftsHealthTogether.com/BCACO 	1-888-257-1985	Tufts Health Together with Boston Children's ACO 1-888-257-1985	 +  Tufts Health Together with Boston Children's ACO A MassHealth Plan Member ID #: NXXXXXXXXXX MassHealth ID #: NXXXXXXXXXX Member: SUSAN A SAMPLE Pharmacy customer service: 000.000.0000 RXBIN: 000000 RXPCN: XXX RXGRP: RX0000 Member services: 888.257.1985 (TTY: 000.000.0000) TuftsHealthTogether.com/BCACO
Tufts Health Together with CHA Cambridge Health Alliance (CHA) <i>in partnership with Tufts Health Plan (THP)</i> www.TuftsHealthTogether.com/CHA 	1-888-257-1985	Tufts Health Together with CHA 1-888-257-1985	 +  Tufts Health Together with CHA A MassHealth Plan Member ID #: NXXXXXXXXXX MassHealth ID #: NXXXXXXXXXX Member: SUSAN A SAMPLE Pharmacy customer service: 000.000.0000 RXBIN: 000000 RXPCN: XXX RXGRP: RX0000 Member services: 888.257.1985 (TTY: 000.000.0000) TuftsHealthTogether.com/CHA





Primary Care ACO Plans



MASSHEALTH HEALTH PLAN CONTACT INFORMATION – EFFECTIVE MARCH 1, 2018			
PRIMARY CARE ACO PLANS*	CUSTOMER SERVICE	BEHAVIORAL HEALTH SERVICES	MEMBER CARD IMAGE
Community Care Cooperative (C3)* C3 members get primary care at a community health center and have access to the most MassHealth specialists and hospitals. www.c3aco.org 	1-866-676-9226	Massachusetts Behavioral Health Partnership (MBHP) www.masspartnership.com 1-800-495-0086	
Partners HealthCare Choice* http://www.partners.org/for-patients/ACO/Partners-HealthCare-Choice-Medicaid.aspx  FOUNDED BY BRIGHAM AND WOMEN'S HOSPITAL AND MASSACHUSETTS GENERAL HOSPITAL	1-800-231-2722	Massachusetts Behavioral Health Partnership (MBHP) www.masspartnership.com 1-800-495-0086	
Steward Health Choice* www.stewardhealthchoice.org 	1-855-860-4949	Massachusetts Behavioral Health Partnership (MBHP) www.masspartnership.com 1-800-495-0086	
*NOTE: To enroll in a Primary Care ACO, members must also select a PCP in that ACO's network. PCPs may not be available in all service areas.			

MCOs and PCC Plan



MASSHEALTH HEALTH PLAN CONTACT INFORMATION – EFFECTIVE MARCH 1, 2018			
MCO PLANS	CUSTOMER SERVICE	BEHAVIORAL HEALTH SERVICES	MEMBER CARD IMAGE
BMC HealthNet Plan www.bmchp.org 	1-888-566-0010	Beacon Health Strategies 1-888-217-3501	 John Q Sample ID# 123456789 MassHealth ID# 10912345678 bmchp.org
Tufts Health Together http://www.tuftshealthtogether.com 	1-888-257-1985	Tufts Health Together 1-888-257-1985	 Tufts Health Together A MassHealth Plan Member ID #: NXXXXXXXXX MassHealth ID #: NXXXXXXXXX Member: SUSAN A SAMPLE Pharmacy customer service: 000.000.0000 RXBIN: 000000 RXPCN: XXX RXGRP: RX0000 Member services: 888.257.1985 (TTY: 000.000.0000) TuftsHealthTogether.com
PCC PLAN*	CUSTOMER SERVICE	BEHAVIORAL HEALTH SERVICES	MEMBER CARD IMAGE
Primary Care Clinician (PCC) Plan* http://www.mass.gov/service-details/primary-care-clinician-pcc-plan-for-masshealth-members 	1-800-841-2900	Massachusetts Behavioral Health Partnership (MBHP) www.masspartnership.com 1-800-495-0086	

***NOTE:**

- To enroll in the PCC Plan, members must also select a PCP in the MassHealth network. PCPs may not be available in all service areas.
- PCC Plan members can enroll in an ACO or MCO at any time.
- Community Partners, who provide long-term services and supports, are not available in the PCC Plan.
- Behavioral Health Community Partners are only available for PCC Plan members who also participate in Community Based Flexible Supports (CBFS), a Massachusetts Department of Mental Health program.

Agenda

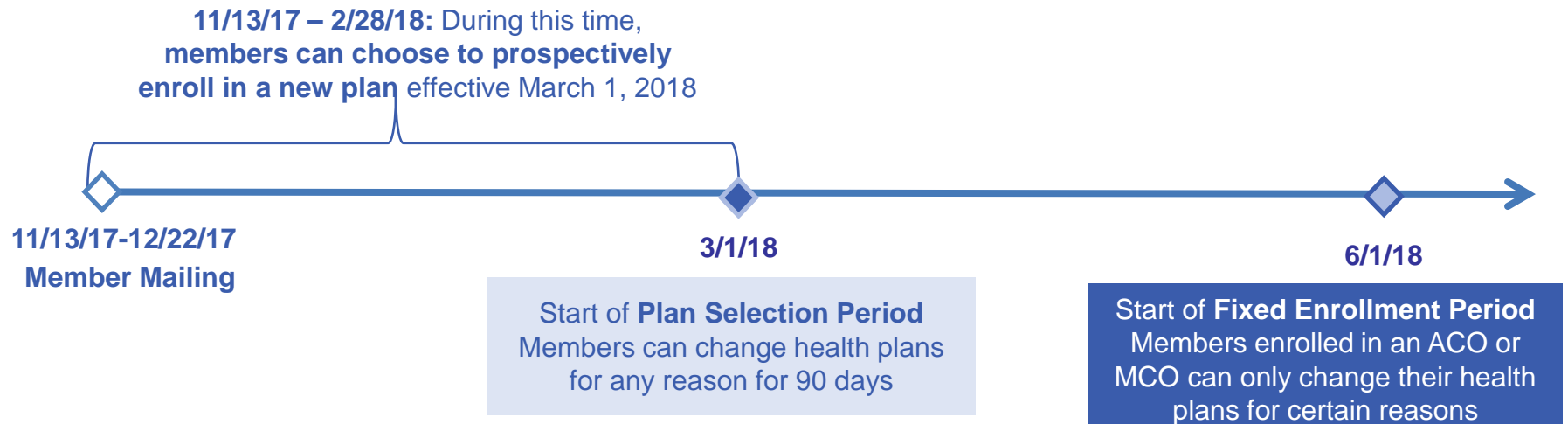


1. Provider Education and Communication Strategy
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Important Member Choice Dates

Below are important dates for managed care eligible members with enrollments effective March 1, 2018



- After March 1, 2018, a new managed care member's Plan Selection Period will be the first **90 days** after the effective date of enrollment to a new Plan, and Fixed Enrollment will be the remaining **275 days** of the year
 - For example, a new managed care eligible member who enrolls into a new Plan effective 6/1/18, will be in their Plan Selection Period from 6/1/18 to 8/29/18, and their Fixed Enrollment Period from 8/30/18 to 5/31/19
- All managed care members have a new plan selection and fixed enrollment period every year
- Member enrollment changes made during the Plan Selection Period will take 2 to 3 days to process

Member Resources



New MassHealth Choices

- MassHealth website with information to search and compare plan choices, learn the importance of selecting a PCP, links to provider directories, and enroll online
- www.masshealthchoices.com



Member Materials

- Enrollment Guide, member mailings, Fact Sheets, and other helpful resources
- <https://masshealthchoices.com/member-materials>



MassHealth Customer Service Center

- Enhanced call center staff to support enrollment activity, member calls, and questions
- 1-800-841-2900
- TTY: 1-800-497-4648



New MassHealth Choices

www.MassHealthChoices.com allows members to **Learn**, **Compare** and **Enroll** in a plan

The screenshot shows the homepage of the MassHealthChoices website. At the top, there is a navigation bar with links for 'Get answers', 'Words to know', 'Member materials', 'Contacting health plans', and 'Contacts and links'. Below this is a large banner image of a family blowing bubbles. The banner contains the MassHealth logo and three main sections: 'Learn', 'Compare', and 'Enroll'. Each section has a brief description of its function. Below the banner, there are three columns of content. The first column is titled 'In-person help near you' and provides information about getting help at a local office. The second column is titled 'It's time to enroll!' and features an image of a child looking at a laptop. The third column is titled 'Get answers' and lists common questions about the program, such as 'What is the MassHealth program?' and 'What is an Accountable Care Organization (ACO)?'. A 'Learn more' link is provided at the bottom of this column.

Home | MassHealth

Secure | <https://masshealthchoices.com>

Apps Managed bookmarks For quick access, place your bookmarks here on the bookmarks bar. Import bookmarks now...

SEARCH CHANGE TEXT SIZE ENGLISH SPANISH

Get answers Words to know Member materials Contacting health plans Contacts and links

MassHealth

Welcome to MassHealth

Changes are coming to the MassHealth program! Starting on **March 1, 2018**, MassHealth will offer new health plans for you to choose from. Use this website to explore your options.

Learn

Learn about the MassHealth program and your available health plan choices

Compare

Compare health plans and providers

Enroll

Enroll in a health plan

In-person help near you

We are here to help you enroll. We can tell you about MassHealth's new health plan options, answer your questions, and help you choose health plans and providers.

[Find in-person help >](#)

It's time to enroll!

Get answers

What is the MassHealth program?

What is an Accountable Care Organization (ACO)?

What is a Managed Care Organization (MCO)?

What is the Primary Care Clinician (PCC) Plan?


[Learn more >](#)





MassHealth Choices – Compare Plans

The Compare Plans tool helps members find which MassHealth health plans are available where they live. To get started, all they have to do is enter their ZIP code.

[Q SEARCH](#) [CHANGE TEXT SIZE](#) [ENGLISH](#) [SPANISH](#)



[Learn](#) 
Learn about the MassHealth program and your available health plan choices

[Compare](#) 
Compare health plans and providers

[Enroll](#)
Enroll in a health plan

[Get answers](#)
[Words to know](#)
[Member materials](#)
[Contacting health plans](#)
[Contacts and links](#)

[Home](#) | [Compare](#) | [Compare plans](#)

Compare plans

- MassHealth is adding more health plan choices as of March 1, 2018. Use this tool to see which new plans will be available where you live
- Enter your ZIP code below to see the plans you can choose where you live
- Compare the extra benefits each plan offers. All plans offer the same basic benefits plus extra benefits. Extra benefits differ for each plan.
- Choose the best health plan for you

Enter your ZIP code:

[Go](#)

[Words to know](#) | [Contacts and links](#) | [Non-discrimination](#) | [Sitemap](#) | [Privacy Policy](#)

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MassHealth Choices – Health Plan Options



All health plan options available in the member's service area will populate on the page. The user can scroll through the different options and choose up to three plans to compare.

Enter your ZIP code: 01201

Compare plans (choose 2 or 3)

Berkshire Fallon Health Collaborative

☐

Select

Toll free number: 1-855-203-4660
TTY: 711
Behavioral health number: 1-888-877-7184
Available Monday - Friday, 8 a.m. to 6 p.m.
www.fallonhealth.org/Berkshires

Basic plan benefits [View details >](#)

More plan details

Description of plan
Member card
Digital tools
Pregnancy benefits
Healthy kids programs
Healthy living and health education
Provider directory links
Hospital affiliation information

See all plan benefits and details >

BMC HealthNet Plan

☐

Select

Toll free number: 1-888-566-0010
Behavioral health number: 1-888-217-3501
Available Monday - Friday, 8 a.m. to 6 p.m.
www.bmchp.org

Basic plan benefits [View details >](#)

More plan details

Description of plan
Member card
Digital tools
Healthy kids programs
Healthy living and health education
Provider directory links
Hospital affiliation information

See all plan benefits and details >

Community Care Cooperative (C3)

☐

Select

Toll free number: 1-866-676-9226
TTY: 711
Behavioral health number: 1-800-495-0086
Available Monday - Friday, 9 a.m. to 5 p.m.
www.C3aco.org

Basic plan benefits [View details >](#)

More plan details

Description of plan
Member card
Healthy kids programs
Healthy living and health education

See all plan benefits and details >

Partners HealthCare Choice

☐

Select

Toll free number: 1-800-231-2722
TTY: 711
Behavioral health number: 1-800-495-0086
<http://www.partners.org/for-patients/ACO/Partners-HealthCare-Choice-Medicaid.aspx>

Basic plan benefits [View details >](#)

More plan details

Description of plan
Member card
Digital tools
Healthy living and health education

See all plan benefits and details >

45



MassHealth Choices – Compare Health Plans

Members can see how plans compare to one another in a side-by-side view. They can review plan details such as: plan descriptions, member card images, digital tools, pregnancy benefits, healthy kids programs, healthy living and health education programs, and view links to provider directories and hospital affiliations. Please note, the PCP provider look-up that is accessible directly on this site is only for ACO PCPs.

Your selections: **Pittsfield** [Change selections](#)

Berkshire Fallon Health Collaborative

Toll free number: 1-855-203-4660
TTY: 711
Behavioral health number: 1-888-877-7184
Available Monday - Friday, 8 a.m. to 6 p.m.
www.fallonhealth.org/Berkshires

[View basic plan benefits >](#)

Description of plan

The Berkshire Fallon Health Collaborative (BFHC) is a partnership between Fallon Health, Berkshire Health Systems and Community Health Programs. BFHC is committed to providing our members with the right care, at the right time, in the right place.

Member card



MEMBERS
Customer Service: 1-855-203-4660 (Toll Free)
Toll-free: 1-800-TELADOC (1-800-835-3263)
Berkshire Health Options: 1-888-877-7184 (Toll Free)

BMC HealthNet Plan

Toll free number: 1-888-566-0010
Behavioral health number: 1-888-217-3501
Available Monday - Friday, 8 a.m. to 6 p.m.
www.bmchp.org

[View basic plan benefits >](#)

Description of plan

Healthy is easier when you have a community to back you up. We get to know you and your family's needs. We connect you to care and local resources. We support you on your road to healthy. Because healthy happens where you are.

Member card



Community Care Cooperative (C3)

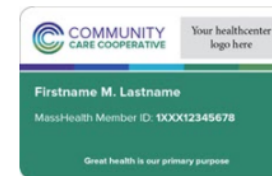
Toll free number: 1-866-676-9226
TTY: 711
Behavioral health number: 1-800-495-0086
Available Monday - Friday, 9 a.m. to 5 p.m.
www.C3aco.org

[View basic plan benefits >](#)

Description of plan

Community Care Cooperative (C3) members get primary care at a community health center. Members have access to most MassHealth specialists and hospitals. For a list of our health centers, go to: www.C3aco.org.

Member card



MassHealth Choices – Searching for Providers



If one scrolls to the bottom of each health plan profile, they will find a section that provides **Provider Directory Links**. This section will direct the member to the right place to search for Primary Care Providers, Specialists, and Behavioral Health Providers in that plan's network.

BMC HealthNet Plan



Toll free number: 1-888-566-0010

Behavioral health number: 1-888-217-3501

Available Monday - Friday, 8 a.m. to 6 p.m.

www.bmchp.org

[View basic plan benefits >](#)

Primary Care Clinician (PCC) Plan



Toll free number: 1-800-841-2900

TTY: 1-800-497-4648

Behavioral health number: 1-800-495-0086

<https://www.mass.gov/service-details/primary-care-clinician-pcc-plan-fo...>

[View basic plan benefits >](#)

Tufts Health Together with BIDCO



Toll free number: 1-888-257-1985

TTY: 1-888-391-5535

Behavioral health number: 1-888-257-1985

Available Monday - Friday, 8 a.m. to 5 p.m.

www.TuftsHealthTogether.com/BIDCO

[View basic plan benefits >](#)



Scroll



Scroll



Provider directory links

Primary Care: <https://www.bmchp.org/utility-nav/find-a-provider/masshealth>

Specialists: <https://www.bmchp.org/utility-nav/find-a-provider/masshealth>

Behavioral Health:
<https://www.beaconhealthoptions.com/members/find-health-care-providers/>

Provider directory links

Primary Care:
<https://masshealth.ehs.state.ma.us/providerdirectory/>

Specialists:
<https://masshealth.ehs.state.ma.us/providerdirectory/>

Behavioral Health:
<https://masshealth.ehs.state.ma.us/providerdirectory/>

Provider directory links

Primary Care: www.masshealthchoices.com/compare/find-primary-care-provider

Specialists: <https://tuftshealthplan.com/bidco>

Behavioral Health: <https://tuftshealthplan.com/bidco>

Hospital affiliation information

[Click here to view the hospitals that are available in this plan.](#)

Hospital affiliation information

The PCC Plan uses the MassHealth network of hospitals. Please go to www.mass.gov/masshealth for a list of hospitals.

Hospital affiliation information

[Click here to view the hospitals that are available in this plan.](#)



MassHealth Provider Directory for Members

Members will use these resources to search for different kinds of providers depending on which plan they choose.

Health Plan Type	Primary Care Providers	Specialists	Behavioral Health Providers
Accountable Care Partnership Plan	MassHealth Choices Find a Primary Care Provider Tool	Health Plan's Provider Directory*	Health Plan's Provider Directory*
Primary Care ACO	MassHealth Choices Find a Primary Care Provider Tool	MassHealth Provider Directory on mass.gov	Massachusetts Behavioral Health Partnership
Managed Care Organization (MCO)	Health Plan's Provider Directory*	Health Plan's Provider Directory*	Health Plan's Provider Directory*
Primary Care Clinician (PCC) Plan	MassHealth Provider Directory on mass.gov	MassHealth Provider Directory on mass.gov	Massachusetts Behavioral Health Partnership

*Links to a Health Plan's Provider Directory will be available through the "Compare Plans" section of MassHealth Choices.

MassHealth Provider Directory









URL: <https://masshealth.ehs.state.ma.us/providerdirectory/>

This tool allows members to find providers participating in the PCC plan and the three Primary Care ACO Plans:

- Partners Health Care Choice
- Steward Health Choice
- Community Care Cooperative (C3)

The table at the top will direct members to the correct resources to search for primary care, specialist, or behavioral health providers.

Important: This site is **not** for members in the following plans: ACO Partnership Plan, MCO, SCO, PACE, or One Care.

Search for providers in one of these plans:		Primary Care	Specialists	Behavioral Health
	MassHealth Network Also for age 65+ and those with secondary insurance	SCROLL DOWN	SCROLL DOWN	CLICK HERE 
	Primary Care Clinician (PCC) Plan	SCROLL DOWN	SCROLL DOWN	CLICK HERE
	Partners HealthCare Choice*	CLICK HERE	SCROLL DOWN	CLICK HERE
	Steward Health Choice*	CLICK HERE	SCROLL DOWN	CLICK HERE
	Community Care Cooperative*	CLICK HERE	SCROLL DOWN	CLICK HERE

*These are the Primary Care ACO health plans. These health plans are not available for enrollment until **March 1, 2018**.

MassHealth Provider Directory – Provider Search



Members can choose the plan they are interested in from the dropdown menu

Then, they can search for provider by provider type, service, or hospital

They can search by location
or

Keyword search - where they can enter the name of a provider

Search all MassHealth providers

Filter by Health Plan:
Health Plan:

Type of Provider:
Primary Care:

- OR -
Specialty:

- OR -
Service:

- OR -
Hospital or Facility:

Location:
Search by city or zip code:

Example: Amherst or 01002

Keyword Search:
Search for provider by name:

Example: 'Smith, John' or 'Geiger Gibson Community Health Center'

Search providers with expertise and experience with disabilities


A Program of the Eunice Kennedy Shriver Center







*This information was obtained from surveys administered by a third party. It is not a complete list of MassHealth providers. If you have any questions about this tool, please use the [Contact Us](#) link on the [Disabilityinfo.org](#) site.

Agenda



1. Provider Education and Community Strategy
2. Overview of PCDI
3. Continuity of Care (CoC)
4. Eligibility Verification System (EVS)
5. Provider Resources
6. Member Information and Resources

7. 2018 Provider Training & Education Schedule



Provider PCDI Webinar Schedule

Phase II: Operations

January 2018		February 2018		March 2018	
Date	Time	Date	Time	Date	Time
01/09/18	1:00 PM	02/01/18	10:00 AM	03/01/18	10:00 AM
01/11/18	10:00 AM	02/06/18	1:00 PM	03/06/18	1:00 PM
01/16/18	1:00 PM	02/08/18	10:00 AM	03/08/18	10:00 AM
01/18/18	10:00 AM	02/13/18	1:00 PM	03/13/18	1:00 PM
01/23/18	1:00 PM	02/15/18	10:00 AM	03/20/18	1:00 PM
01/25/18	10:00 AM	02/20/18	1:00 PM	03/22/18	10:00 AM
01/30/18	1:00 PM	02/22/18	10:00 AM	03/27/18	1:00 PM
		02/27/18	1:00 PM	03/29/18	10:00 AM

To enroll in a webinar session, please register at the **MassHealth Learning and Productivity Center** at www.masshealthtraining.com and create your profile. Once you are registered, select the preferred course date and time available.

Provider In-Person Events



Schedule of Upcoming PCDI Provider Events			
January 2018			
Location	Date	Time	Occupancy
Bristol Community College 777 Elsbree Street, Fall River, MA 02720	January 10, 2018	Session 1: 10:00 AM-11:30 AM Session 2: 1:00 PM-2:30 PM	150
Holiday Inn 30 Washington Street, Somerville, MA 02143	January 19, 2018	Session 1: 10:00 AM-11:30 AM Session 2: 1:00 PM-2:30 PM	70
Lawrence Public Library 51 Lawrence Street, Lawrence, MA 01841	January 25, 2018	Session 1: 10:00 AM-11:30 AM Session 2: 1:00 PM-2:30 PM	200
UMass Medical School Amphitheater 333 South Street, Shrewsbury, MA 01545	January 31, 2018	Session 1: 10:00 AM-11:30 AM Session 2: 1:00 PM-2:30 PM	100
March 2018			
Location	Date	Time	Occupancy
Holiday Inn 30 Washington Street, Somerville, MA 02143	March 5, 2018	Session 1: 10:00 AM-11:30 AM Session 2: 1:00 PM-2:30 PM	70
Castle of Knights 1599 Memorial Drive Chicopee, MA 01020	March 21, 2018	Session 1: 10:00 AM-11:30 AM Session 2: 1:00 PM-2:30 PM	300
Berkshire Crowne Plaza 1 West Street, Pittsfield, MA 01201	March 28, 2018	Session 1: 10:00 AM-11:30 AM Session 2: 1:00 PM-2:30 PM	100
To attend one of our events, please register at the MassHealth Learning Management System (LMS) via www.masshealthtraining.com and create your profile. Once you are registered, select the preferred event date and time available under the Community Based Training Events tab.			



2018 Provider PCDI Training Schedule

- **Phase III** training will focus on MassHealth's Community Partners program
 - Trainings will be from April 1, 2018 through May 31, 2018
- To learn more about webinars/in-person sessions, please visit the: **MassHealth Learning and Productivity Center** at www.masshealthtraining.com